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| Fill in this information to identify your case: | |
|---|---|
| United States Bankruptcy Court for the: Northern District of: Illinois | |
| (State) Case number (if known) | Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13 |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | art 1: Identify Yourself | | |
|----|---|----------------------------|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | Mark | |
| | Write the name that is on your government-issued | First name | First name |
| | picture identification (for example, your driver's | Middle name Coleman | Middle name |
| | license or passport | Last name | Last name |
| | Bring your picture identification to your meeting with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. | All other names you | | |
| | have used in the last 8 years | First name | First name |
| | Include your married or | Middle name | Middle name |
| | maiden names. | Last name | Last name |
| | | First name | First name |
| | | Middle name | Middle name |
| | | Last name | Last name |
| 3. | Only the last 4 digits of your Social | XXX - XX- 9405 | xxx - xx- |
| | Security number or federal Individual | OR | OR |
| | Taxpayer Identification number (ITIN) | 9 xx - xx- | 9 xx - xx- |

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| D | ebtor 1 Mark | Coleman | Case number (if known) | | |
|----|--|---|--|--|--|
| _ | First Name | Middle Name Last Name | | | |
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | |
| 4. | Any business names and Employer | I have not used any business names or EINs. | I have not used any business names or EINs. | | |
| | Identification Numbers (EIN) you have used in the last | Business name | Business name | | |
| | 8 years | Business name | Business name | | |
| | Include trade names and doing business as names | EIN | EIN | | |
| | | EIN | EIN | | |
| 5. | Where you live | | If Debtor 2 lives at a different address: | | |
| | | 6685 Double Eagle Dr Apt 306 Number Street | Number Street | | |
| | | Woodridge Illinois 60517 | | | |
| | | City State Zip Code | City State Zip Code | | |
| | | Du Page County | County | | |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. | | |
| | | Number Street | Number Street | | |
| | | City State Zip Code | City State Zip Code | | |
| _ | | Otate Zip Gode | Orac Zip Oode | | |
| 6. | Why you are choosing this district | Check one: | Check one: | | |
| | to file for bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | | |
| | | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) | | |
| | | • | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

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| Debtor 1 Mark | | Coleman | Case nu | mber <i>(if kno</i> | own) |
|---|---|--|---|---|--|
| First Name | Middle Name | Last Name | | | |
| Part 2: Tell the Court Abo | out Your Bankruptcy Cas | se | | | |
| The chapter of the Bankruptcy Code you are choosing to file under | | escription of each, see <i>Notice</i>). Also, go to the top of page | | | C. § 342(b) for Individuals Filing for opriate box. |
| 8. How you will pay the fee | more details about h cashier's check, or m may pay with a credi | now you may pay. Typically noney order If your attorn t card or check with a prele in installments. If you che four Filing Fee in Installment trequired to, waive your fer ne that applies to your familion, you must fill out the A | , if you are p ley is submit printed addre noose this op nts (Official F quest this op e, and may c nily size and | aying the ting your ess. otion, sig form 103 tion only do so onl you are u | the clerk's office in your local court for e fee yourself, you may pay with cash, r payment on your behalf, your attorney an and attach the <i>Application for SA</i>). If you are filing for Chapter 7. By law, a ly if your income is less than 150% of unable to pay the fee in installments). If the Chapter 7 Filing Fee Waived (Official |
| 9. Have you filed for bankruptcy within the last 8 years? | No. Yes. District District District | \ | When MM / D When | D/YYYY D/YYYY | Case number Case number Case number |
| 10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | Ves. Debtor District Debtor District | | When | D / YYYY D / YYYY | Relationship to you Case number, if known Relationship to you Case number, if known |
| 11. Do you rent your residence? | ✓ No. Go to li | ine 12. | | | o you want to stay in your residence? St You (Form 101A) and file it with |

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Debtor 1 Mark Coleman Case number (if known) Middle Name First Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. **✓** proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. **|** For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have $\overline{}$ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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Debtor 1 Mark Coleman Case number (if known)
First Name Middle Name Last Name

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan. Attach a copy of the certificate and the payment plan. The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit ☐ I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you are not eligible to file. I certify that I asked for credit counseling services I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. My physical disability causes me to Disability. My physical disability causes me to Disability. be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for waiver of credit counseling with the court. waiver of credit counseling with the court.

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Debtor 1 Mark Coleman Case number (if known) Middle Name First Name Last Name Part 6: **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as 16. What kind of debts do incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded No. and administrative expenses are paid that Yes. funds will be available for distribution to unsecured creditors? **7** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 50-99 5,001-10,000 50,001-100,000 do you estimate that 100-199 10,001-25,000 More than 100,000 you owe? 200-999 \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your liabilities to be? \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Sign Below Part 7: I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. X X /s/ Mark Coleman Signature of Debtor 1 Signature of Debtor 2 Executed on _ 9/21/2017 Executed on MM / DD / YYYY MM / DD / YYYY

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| Debtor 1 Mark First Name | Middle Name | Coleman Last Name | Case number (if | known) |
|---|--|----------------------|------------------------------|---|
| riist ivaille | Wildule Name | Last Name | | |
| For your attorney, if you are represented by one | eligibility to proceed und | der Chapter 7, 11, 1 | 2, or 13 of title 11, United | nave informed the debtor(s) about d States Code, and have explained the also certify that I have delivered to the |
| If you are not represented by an attorney, you do not | debtor(s) the notice requ | ired by 11 U.S.C. § | 342(b) and, in a case in v | which § 707(b)(4)(D) applies, certify that I lules filed with the petition is incorrect. |
| need to file this page. | /s/ Mary E.R. Walter Signature of Attorney f | | Date | 9/21/2017 IM / DD / YYYY |
| | Mary E.R. Walters | | | |
| | Printed name | | | |
| | Semrad Law Firm | | | |
| | Firm name | | | |
| | 1444 N. Farnsworth A | venue | | |
| | Street | | | |
| | Suite 300 | | | |
| | | | | |
| | Aurora | | Illinois | 60505 |
| | City | | State | Zip Code |
| | Contact phone | 3124477861 | Email address | mwalters@semradlaw.com |
| | 6315822 | | Illinois | |
| | Bar number | | State | |

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| Fill in this information to identify your case: | | | | | | | |
|---|---------------------------|-------------|----------------------|--|--|--|--|
| Debtor 1 | Mark | | Coleman | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois | | | | |
| | | | (State) | | | | |
| Case number (If known) | | | | | | | |

| Check if this is an |
|---------------------|
| amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| | Your assets Value of what you own |
|--|---|
| . Schedule A/B: Property (Official Form 106A/B) | \$0.00 |
| 1a. Copy line 55, Total real estate, from Schedule A/B | |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$13,095.00 |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$13,095.00 |
| Part 2: Summarize Your Liabilities | |
| | Your liabilities Amount you owe |
| Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) | \$14,864.00 |
| 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | |
| s. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) | \$1,000.00 |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$14,831.00 |
| | \$30,695.00 |
| Your total liabilities | |
| | |
| Part 3: Summarize Your Income and Expenses | |
| Part 3: Summarize Your Income and Expenses Schedule I: Your Income (Official Form 106I) | \$3,984.85 |
| | \$3,984.85 |

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Coleman Debtor 1 Mark _ Case number (if known) Middle Name First Name Last Name Part 4: **Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes. 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$5,563.17 Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: From Part 4 on Schedule E/F, copy the following: **Total claim** \$0.00 9a. Domestic support obligations (Copy line 6a.) \$1,000.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.00 9d. Student loans. (Copy line 6f.) \$0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$0.00 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

\$1,000.00

9g. Total. Add lines 9a through 9f.

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| Fill in this | information t | to identify your ca | ase: | | | | | |
|--|--|--|--|-----------------------|--|----------------------|---|---|
| Dalata u 1 | Made | | | | Calaman | | | |
| Debtor 1 | Mark First N | lame | Middle N | lame | Coleman Last Name | | | |
| Debtor 2 | | | aa.a | | 2401.114.1110 | | | |
| (Spouse, if fil | First N | lame | Middle N | lame | Last Name | | | |
| United Sta | ates Bankrupt | cy Court for the: | Northern | | District of Illinois (State) | | | |
| Case num (If known) | ber | | | | | | | |
| Officia | ıl Form | 106A/B | | | | | | Check if this is an amended filing |
| Sched | dule A/ | B: Prope | rty | | | | | 12/1 |
| category v responsibl write your | where you the le for supplying name and c | ink it fits best. E ing correct infor ase number (if k | se as complete a mation. If more s nown). Answer e | nd ac pace very | asset only once. If an asset fits in more ocurate as possible. If two married peopl is needed, attach a separate sheet to the question. or Other Real Estate You Own or Ha | e are his for | filing together, both a m. On the top of any a | re equally |
| | | | _ | | | | | |
| | No. Go to P | | uitable interest i | n an | y residence, building, land, or similar pro | perty | f | |
| <u> </u> | | | | | | | | |
| ш | Yes. Where i | s the property? | | | | | | |
| | | | | Wh | at is the property? Check all that apply. | | | claims or exemptions. Put |
| 1.1 | Street address, if available, or other description | | Ш | Single-family home | the amount of any secured claims on Schedule L Creditors Who Have Claims Secured by Property. | | | |
| | | | Duplex or multi-unit building | | | Current value of the | Current value of the | |
| | | | _ | Ш | Condominium or cooperative | | entire property? | portion you own? |
| | | | | Ш | Manufactured or mobile home | - | | |
| | Number | Street | | Н | Land Investment property | 1 | Describe the nature o | f your ownership |
| | | | | Н | Timeshare | i | interest (such as fee s | simple, tenancy by |
| | City | State | Zip Code | Н | Other | 1 | the entireties, or a life | e estate), if Known. |
| | | | | | o has an interest in the property? Check | | Check if this is co (see instructions) | mmunity property |
| | | | | one | | | | |
| | | | | Ш | Debtor 1 only | | | |
| | | | | Ш | Debtor 2 only | | | |
| | | | | Ш | Debtor 1 and Debtor 2 only At least one of the debtors and another | | | |
| | | | | Ш | | | | |
| | | | | | ner information you wish to add about thi perty identification number: | is iten | n, such as local | |
| If you | own or have | more than one, lis | st here: | • | · · · · · · · · · · · · · · · · · · · | | | |
| | | | | Wh | at is the property? Check all that apply. | | | claims or exemptions. Put |
| 1.2 | Stroot addro | ss, if available, or o | other description | | Single-family home | | | red claims on Schedule D: nims Secured by Property. |
| | Street addres | ss, ii avaliable, or c | otilei description | | Duplex or multi-unit building | | | |
| | | | | | Condominium or cooperative | | Current value of the entire property? | Current value of the portion you own? |
| | | | | | Manufactured or mobile home | | | <u> </u> |
| | Number | Street | _ | | Land | | Describe the nature o | f vour ownership |
| | | | | | Investment property | i | interest (such as fee s | simple, tenancy by |
| | City | State | Zip Code | Ш | Timeshare Other | † | the entireties, or a life | e estate), if known. |
| | , | | • | Ш | | | Chack if this is co | mmunity property |
| | | | | Wh one | o has an interest in the property? Check | | (see instructions) | minumey property |
| | | | | | Debtor 1 only | | _ | |
| | | | | П | Debtor 2 only | | | |
| | | | | Ħ | Debtor 1 and Debtor 2 only | | | |
| | | | | Ħ | At least one of the debtors and another | | | |
| | | | | | ner information you wish to add about thi perty identification number: | is iten | n, such as local | |

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| | Mark | | Coleman | Case number | (if known) | |
|-------------------------------|---|--|--|----------------|---|---|
| | First Name | Middle Name | Last Name | | | |
| 1.3 <u>Stre</u> | et address, if available, or ot | | What is the property? Check all that ap Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home | | the amount of any secu | claims or exemptions. Put red claims on Schedule D: ims Secured by Property. Current value of the portion you own? |
| Nun City | nber Street State | Zip Code | Land Investment property Timeshare Other | i | Describe the nature of interest (such as fee sithe entireties, or a life | imple, tenancy by e estate), if known. |
| | |]]]] | Who has an interest in the property? (Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anoth Other information you wish to add aborroperty identification number: | ner | Check if this is con (see instructions) | mmunity property |
| | the dollar value of the po ve attached for Part 1. W | rtion you own for a | all of your entries from Part 1, includi | ng any entries | for pages | |
| Do you ow you own t | hat someone else drives. If yans, trucks, tractors, sport uto | equitable interest you lease a vehicle, a | in any vehicles, whether they are reals also report it on Schedule G: Executory (cycles | - | - | |
| 3.1 | Make Model: | Hyundai | Who has an interest in the proper | rty? Check | Do not deduct secured | |
| | Year: | Accent 2016 | one. Debtor 1 only | | the amount of any secu | claims or exemptions. Put ured claims on Schedule D: aims Secured by Property. |
| | Year: Approximate mileage: Other information: 2016 Hyundai Accent | | one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and a | another | the amount of any secu | red claims on Schedule D: |
| | Approximate mileage: Other information: | 2016 | Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | | the amount of any secu Creditors Who Have Cla Current value of the entire property? | red claims on Schedule D: aims Secured by Property. Current value of the portion you own? |
| 3.2 | Approximate mileage: Other information: | 2016 | Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and a | operty (see | the amount of any secu Creditors Who Have Cla Current value of the entire property? \$9575.00 | red claims on Schedule D: aims Secured by Property. Current value of the portion you own? |

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| , | | Middle Name | Last Name | Case number | 51 (II KIIOWII) | | |
|-----|---|-------------|---|--|--|--|--|
| | Make Model: Year: Approximate mileage: | | Who has an interest in the proone. Debtor 1 only | pperty? Check | the amount of any secu | claims or exemptions. Pured claims on Schedule nims Secured by Property | |
| | Other information: | | Debtor 2 only Debtor 1 and Debtor 2 only | | Current value of the entire property? | Current value of the portion you own? | |
| | Other imonnation. | | At least one of the debtors a | nd another | | | |
| | | | Check if this is community | | | | |
| | | | instructions) | property (see | | | |
| 3.4 | | | Who has an interest in the pro | perty? Check | | cured claims or exemptions. Pu | |
| | Model: | | one. | | the amount of any secured claims on Sc. Creditors Who Have Claims Secured by F | | |
| | Year: Approximate mileage: | | Debtor 1 only | | Creditors with thave old | ums secured by Froperi | |
| | | | Debtor 2 only | | Current value of the entire property? | Current value of the portion you own? | |
| | Other information: | | Debtor 1 and Debtor 2 only | | entire property: | portion you own? | |
| | | | At least one of the debtors a | nd another | | | |
| | | | Check if this is community instructions) | y property (see | | | |
| Y | 'es | | | | | | |
| 4.1 | 'es Make Model: | | Who has an interest in the proone. | pperty? Check | the amount of any secu | red claims on <i>Schedule</i> | |
| 4.1 | Make Model: Year: | | • | pperty? Check | the amount of any secu | red claims on <i>Schedule</i> | |
| 4.1 | Make Model: | <u></u> | one. | operty? Check | the amount of any secu Creditors Who Have Cla Current value of the | rred claims on Schedule aims Secured by Propert Current value of the | |
| 4.1 | Make Model: Year: | | one. Debtor 1 only | pperty? Check | the amount of any secu Creditors Who Have Cla | red claims on Schedule aims Secured by Propert | |
| 4.1 | Make Model: Year: Approximate mileage: | = | one. Debtor 1 only Debtor 2 only | | the amount of any secu Creditors Who Have Cla Current value of the | | |
| 4.1 | Make Model: Year: Approximate mileage: | | one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | nd another | the amount of any secu Creditors Who Have Cla Current value of the | rred claims on Schedule nims Secured by Propert Current value of the | |
| 4.1 | Make Model: Year: Approximate mileage: Other information: | | one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors at Check if this is community | nd another y property (see | the amount of any secu Creditors Who Have Cla Current value of the entire property? | red claims on Schedule aims Secured by Propert Current value of the portion you own? claims or exemptions. F | |
| 4.1 | Make Model: Year: Approximate mileage: Other information: Make Model: | | one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and instructions) Who has an interest in the proone. | nd another y property (see | the amount of any secu Creditors Who Have Class Current value of the entire property? Do not deduct secured the amount of any secu | claims or Schedule of the portion you own? | |
| 4.1 | Make Model: Year: Approximate mileage: Other information: Make Model: Year: | | one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors at instructions) Who has an interest in the proone. Debtor 1 only | nd another y property (see | the amount of any secu Creditors Who Have Class Current value of the entire property? Do not deduct secured the amount of any secu | claims or Schedule control of the portion you own? claims or exemptions. For the portion of the | |
| 4.1 | Make Model: Year: Approximate mileage: Other information: Make Model: | | one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors at instructions) Who has an interest in the proone. Debtor 1 only Debtor 2 only | nd another y property (see | the amount of any secucreditors Who Have Classifications Who Have Classifications with the entire property? Do not deduct secured the amount of any secucreditors Who Have Classifications Who Have Classifications with the entire property? | claims or schedule of the portion you own? claims or exemptions. Fured claims on Schedule of the portion you own? claims or exemptions. Fured claims on Schedule of the current value of the | |
| 4.1 | Make Model: Year: Approximate mileage: Other information: Make Model: Year: | | one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and instructions) Who has an interest in the proone. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only | nd another y property (see operty? Check | the amount of any secucreditors Who Have Classifications Current value of the entire property? Do not deduct secured the amount of any secucreditors Who Have Classifications Creditors Credit | red claims on Schedule aims Secured by Propert Current value of the portion you own? claims or exemptions. F ured claims on Schedule aims Secured by Propert | |
| 4.1 | Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage: | | one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors at instructions) Who has an interest in the proone. Debtor 1 only Debtor 2 only | nd another y property (see operty? Check | the amount of any secucreditors Who Have Classifications Who Have Classifications with the entire property? Do not deduct secured the amount of any secucreditors Who Have Classifications Who Have Classifications with the entire property? | claims or exemptions. For irred claims or exemptions. It is claims or exemptions. For irred claims on Schedule irred claims on Schedule irred claims on Schedule irred claims or exemptions. For irred claims on Schedule irred claims or exemptions or exemptions. For irred claims on Schedule irred claims on Schedule irred claims or exemptions. For irred claims on Schedule irred claims on Schedule irred claims or exemptions. | |

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Debtor 1 Mark Coleman Case number (if known) Middle Name First Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Used Furniture \$875.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... **Used Electronics** \$800.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections, other collections, memorabilia, collectibles Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... **Used Clothes** \$1000.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... Used Jewelry \$120.00 13. Non-farm animals Examples: Dogs, cats, birds, horses Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$2795.00 for Part 3. Write that number here

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Coleman Debtor 1 Mark Case number (if known) Middle Name First Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. **Cash** Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition **✓** No Yes Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: \$350.00 17.1. Checking account: Chase Bank 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts **✓** No Institution or issuer name: Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture % of ownership: Name of entity Yes. Give specific information about

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| Debt | tor 1 Mark | | Coleman | Case number (if known) | |
|------|---|--|-----------------------------|--|----------|
| | First Name | Middle Name | Last Name | | |
| 20. | Negotiable instruments | orate bonds and other negotial include personal checks, cashiers' ents are those you cannot transfer | checks, promissory not | es, and money orders. | |
| | Yes. Give specific information about them | Issuer name: | | | |
| | | | | | · |
| 21. | Retirement or pension | | | | |
| | Examples: Interests in If | RA, ERISA, Keogh, 401(k), 403(b) | , thrift savings accounts | or other pension or profit-sharing plans | |
| | No | Type of account: | Institution name: | | |
| | Yes. List each account | 401(k) or similar plan: | mstitution name. | | |
| | separately. | Pension plan: | pension through USPS | | \$0.00 |
| | | IRA: | | | |
| | | Retirement account: | | | |
| | | Keogh: | | | |
| | | Additional account: | | | |
| | | Additional account: | | | |
| 22. | | prepayments I deposits you have made so that with landlords, prepaid rent, public | | | |
| | ✓ Yes | Electric: | | | |
| | | Gas: | | | |
| | | Heating oil: | | | |
| | | Security deposit on rental unit: | Landlord Security Depo | osit | \$375.00 |
| | | Prepaid rent: | | | |
| | | Telephone: | | | |
| | | Water: | | | |
| | | Rented furniture: | | | |
| | | Other: | | | · |
| 23. | Annuities (A contract fo | or a periodic payment of money to | you, either for life or for | a number of years) | · — |
| | ✓ No ☐ Yes | Issuer name and description: | | | |
| | | | | | |
| | | | | | |
| | | | | | |

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| Debt | tor 1 Mark | Coleman | Case number (if known) | |
|------|--|---|---|---|
| | First Name | Middle Name Last Name | | |
| 24. | Interests in an education IRA, in 26 U.S.C. §§ 530(b)(1), 529A(b), | n an account in a qualified ABLE program, or unde and 529(b)(1). | r a qualified state tuition program. | |
| | No Institution name an Yes | d description. Separately file the records of any interest | ts.11 U.S.C. § 521(c): | |
| | | | | |
| 25. | Trusts, equitable or future inter | ests in property (other than anything listed in line | 1), and rights or powers | |
| | ✓ No ☐ Yes. Describe | | | |
| 26. | | s, trade secrets, and other intellectual property , websites, proceeds from royalties and licensing agree | ements | |
| | ✓ No Yes. Describe | | | |
| 27. | Licenses, franchises, and other Examples: Building permits, exclusions | general intangibles sive licenses, cooperative association holdings, liquor li | censes, professional licenses | |
| | No Yes. Describe | | | |
| | | | | |
| | | | | |
| Mor | ney or property owed to you? | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | | | | portion you own? |
| | Tax refunds owed to you | | | portion you own? Do not deduct secured |
| | Tax refunds owed to you ✓ No ✓ Yes. Give specific information | | Federal: | portion you own? Do not deduct secured |
| | Tax refunds owed to you ✓ No | hether ns | Federal: State: | portion you own? Do not deduct secured claims or exemptions. \$0.00 |
| 28. | Tax refunds owed to you No Yes. Give specific information about them, including whyou already filed the returnent the tax years | hether ns | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed to you No Yes. Give specific information about them, including whyou already filed the returnent the tax years | hether ns | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed to you No Yes. Give specific information about them, including whyou already filed the returnent the tax years Family support Examples: Past due or lump sum and No | hether ns limony, spousal support, child support, maintenance, | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed to you No Yes. Give specific information about them, including whyou already filed the returnent the tax years | hether ns limony, spousal support, child support, maintenance, | State: Local: divorce settlement, property settlemen | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed to you No Yes. Give specific information about them, including whyou already filed the returnent the tax years Family support Examples: Past due or lump sum and No | hether ns limony, spousal support, child support, maintenance, | State: Local: divorce settlement, property settlement Alimony: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t |
| 28. | Tax refunds owed to you No Yes. Give specific information about them, including whyou already filed the returnent the tax years Family support Examples: Past due or lump sum and No | hether ns limony, spousal support, child support, maintenance, | State: Local: divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed to you ✓ No Yes. Give specific information about them, including whyou already filed the return and the tax years | hether ns dimony, spousal support, child support, maintenance, | State: Local: divorce settlement, property settlement Alimony: Maintenance: Support: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 |
| 28. | Tax refunds owed to you ✓ No Yes. Give specific information about them, including whyou already filed the returnent that a years | hether ns dimony, spousal support, child support, maintenance, | State: Local: divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed to you ✓ No Yes. Give specific information about them, including whyou already filed the returnent that a years | hether ms dimony, spousal support, child support, maintenance, | State: Local: divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |

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| Debt | tor 1 Mark | Coleman | Case number (if known) | |
|------|--|--|--|---|
| | First Name Middle Name | e Last Name | <u> </u> | |
| 31. | Interests in insurance policies Examples: Health, disability, or life insurance; he | ealth savings account (HSA); credit, hor | meowner's, or renter's insurance | |
| | No ✓ Yes. Name the insurance company | Company name: | Beneficiary: | Surrender or refund value: |
| | of each policy and list its value | Life Insurance - Through Work | | \$0.00 |
| | | | | |
| 32 | Any interest in property that is due you from | someone who has died | | |
| 52. | If you are the beneficiary of a living trust, expect property because someone has died. | | or are currently entitled to receive | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| 33. | Claims against third parties, whether or not Examples: Accidents, employment disputes, ins | | demand for payment | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| 34. | Other contingent and unliquidated claims o to set off claims | f every nature, including countercla | aims of the debtor and rights | |
| | No | | | |
| | Yes. Describe | | | |
| 35. | Any financial assets you did not already list | | | |
| | ✓ No Yes. Describe | | | |
| | | | | |
| 36. | Add the dollar value of all of your entries fro for Part 4. Write that number here | | . • | \$725.00 |
| | | | | |
| Part | 5: Describe Any Business-Related Pro | operty You Own or Have an Int | erest In. List anv real estate in Part | 1. |
| | Do you own or have any legal or equitable in | | <u>-</u> | |
| | No. Go to Part 6. | | | urrent value of the ortion you own? |
| | Yes. Go to line 38. | | | o not deduct secured claims exemptions |
| 38. | Accounts receivable or commissions you all | ready earned | | |
| | ✓ No ✓ Yes. Describe | | | |
| | L | | | |
| 39. | Office equipment, furnishings, and supplies Examples: Business-related computers, softwar | e, modems, printers, copiers, fax macl | nines, rugs, telephones, desks, chairs, electr | onic devices |
| | ✓ No | | | |
| | Yes. Describe | | | |
| | | | | |

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| Debt | tor 1 Mark | Coleman | Case number (if known) | |
|----------|--|--|--------------------------------|--------------------------------------|
| | First Name | Middle Name Last Name | | |
| 40. | Machinery, fixtures, e | quipment, supplies you use in business, and tools of your | rtrade | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| | _ | | | |
| | | | | |
| 41. | Inventory | | | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| | | | | |
| 40 | | | | |
| 42. | Interests in partnersh | ips or joint ventures | | |
| | ✓ No | Name of ontitu | 0/ of our probing | |
| | Yes. Give specific | Name of entity: | % of ownership: | |
| | information about | | | |
| | them | | | |
| | | | | |
| | | | | |
| 43. | Customer lists, mailing | lists, or other compilations | | |
| | ✓ No | | | |
| | | nclude personally identifiable information (as defined in 11 U.S | S.C. § 101(41A))? | |
| | _ | | | |
| | No | | | |
| | Yes. Desci | ribe | | |
| 4.4 | A b | | | |
| 44. | Any business-related | property you did not already list | | |
| | ✓ No | | | |
| | Yes. Give specific | | | |
| | information | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| 15 A | dd the dellar value of a | all of your ontrine from Part 5, including any ontrine for pr | ages you have attached | |
| | | all of your entries from Part 5, including any entries for parting there | | |
| <u> </u> | | | | |
| Part | 6: Describe Any Fa | arm- and Commercial Fishing-Related Property Y interest in farmland, list it in Part 1. | ou Own or Have an Interest In. | |
| 46. | Do you own or have a | ny legal or equitable interest in any farm- or commercial | fishing-related property? | |
| | No. Go to Part 7. | | | rrent value of the |
| | ✓ No. Go to Part 7. Yes. Go to line 47. | | | rtion you own? |
| | Tes. Go to line 47. | | | not deduct secured claims exemptions |
| 47 | Farm animals | | 011 | |
| | Examples: Livestock, po | oultry, farm-raised fish | | |
| | No No | | | |
| | Yes. Describe | | | |
| | L 165. Describe | | | |
| | | | | |

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| Debt | tor 1 Mark First Name | | Coleman ast Name | Case number (if known) | |
|--------------|--|---|----------------------------|--------------------------------|--------------|
| 48. | Crops-either growing | | | | |
| | No Yes. Describe | | | | |
| 49. | Farm and fishing equip No Yes. Describe | oment, implements, machinery, fixture | es, and tools of trade | | |
| 50. | Farm and fishing supp | lies, chemicals, and feed | | | |
| | No Yes. Describe | | | | |
| 51. | Any farm- and comme No Yes. Describe | rcial fishing-related property you did r | not already list | | |
| 52 A. | dd the deller value of el | Lef your entries from Bort 6 including | a any entries for pages ve | u have attached | |
| | | l of your entries from Part 6, including here | g any entries for pages yo | u nave attached | |
| Part 1 | 7. Describe All Pro | perty You Own or Have an Intere | est in That You Did Not | List Ahove | |
| | Do you have other prop | perty of any kind you did not already li | | 1007.0000 | |
| | | s, country club membership | | | |
| | Yes. Give specific information | | | | |
| | | | | | |
| 54. A | dd the dollar value of al | I of your entries from Part 7. Write tha | at number here | | , |
| | | | | | |
| | | | | | |
| Part 8 | 8: List the Totals of | Each Part of this Form | | | |
| 55. F | Part 1: Total real estate | , line 2 | | | |
| 56. p | oart 2 total vehicles, lin | e 5 | \$9575.00 | | |
| 57. P | art 3: Total personal ar | d household items, line 15 | \$2795.00 | | |
| 58. P | art 4: Total financial as | sets, line 36 | \$725.00 | | |
| 59. F | Part 5: Total business-re | elated property, line 45 | | | |
| 60. F | Part 6: Total farm- and | ishing-related property, line 52 | | | |
| 61. F | Part 7: Total other prop | erty not listed, line 54 | | | |
| 62. 1 | Fotal personal property. | Add lines 56 through 61 | \$13095.00 | Copy personal property total ▶ | + \$13095.00 |
| 63. T | otal of all property on S | chedule A/B. Add line 55 + line 62 | | | \$13095.00 |

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| Fill in this info | rmation to identify your case: | | | 66 |
|--|--|---|---|--|
| Debtor 1 | , | | | |
| | Mark | | Coleman | |
| Debtor 2 | First Name | Middle Name | Last Name | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States | Bankruptcy Court for the: No | rthern [| District of Illinois | |
| Case number | | | (State) | |
| (If known) | | | | Check if this is a |
| Official | Form 106C | | | amended filing |
| Schedu | e C: The Propert | ty You Claim a | s Exempt | 04/1 |
| For each ite state a specthe amount tax-exempt under a law your exempt | ges, write your name and or m of property you claim a ific dollar amount as exe of any applicable statutor retirement funds—may b | case number (if knowr as exempt, you must mpt. Alternatively, yo ry limit. Some exemp e unlimited in dollar to a particular dollar ne applicable statutor | specify the amount of the e u may claim the full fair ma tions—such as those for he amount. However, if you cla amount and the value of th | xemption you claim. One way of doing so is to rket value of the property being exempted up to alth aids, rights to receive certain benefits, and aim an exemption of 100% of fair market value ne property is determined to exceed that amount |
| ✓ You You | et of exemptions are you clai are claiming state and federa are claiming federal exempti | ming? Check one only, e al nonbankruptcy exem ons. 11 U.S.C. § 522(b) | | |
| You You For any p | et of exemptions are you clai are claiming state and federa are claiming federal exempti property you list on Schedule ecription of the property and ichedule A/B that lists this | ming? Check one only, e al nonbankruptcy exemple ons. 11 U.S.C. § 522(b) of A/B that you claim as a current value of the portion you own | otions. 11 U.S.C. § 522(b)(3) | elow. u claim Specific laws that allow exemption |
| You You For any p Brief des | et of exemptions are you clai are claiming state and federa are claiming federal exempti property you list on Schedule ecription of the property and ichedule A/B that lists this | ming? Check one only, e al nonbankruptcy exemplons. 11 U.S.C. § 522(b) of A/B that you claim as a Current value of the portion you | otions. 11 U.S.C. § 522(b)(3) (2) exempt, fill in the information b Amount of the exemption you | elow. u claim Specific laws that allow exemption |
| You You You 2. For any p Brief des line on S property Brief descriptic Used | et of exemptions are you clai are claiming state and federa are claiming federal exemption property you list on Schedule scription of the property and ichedule A/B that lists this | ming? Check one only, e al nonbankruptcy exemplons. 11 U.S.C. § 522(b) a A/B that you claim as a Current value of the portion you own | otions. 11 U.S.C. § 522(b)(3) (2) exempt, fill in the information b Amount of the exemption you | elow. a claim Specific laws that allow exemption semption. 735 ILCS 5/12-1001(a) |
| You You 2. For any p Brief des line on S property Brief description | et of exemptions are you clai are claiming state and federa are claiming federal exemption property you list on Schedule excription of the property and ischedule A/B that lists this | ming? Check one only, e al nonbankruptcy exemple ons. 11 U.S.C. § 522(b) of A/B that you claim as a current value of the portion you own Copy the value from Schedule A/B | exempt, fill in the information became the control of the exemption you check only one box for each exemption. | elow. a claim Specific laws that allow exemption semption. 735 ILCS 5/12-1001(a) |
| You You You 2. For any p Brief des line on S property Brief descriptio Used Line from Schedule Brief | et of exemptions are you clai are claiming state and federa are claiming federal exempti property you list on Schedule scription of the property and ichedule A/B that lists this in: d Clothes | ming? Check one only, e al nonbankruptcy exemple ons. 11 U.S.C. § 522(b) of A/B that you claim as a current value of the portion you own Copy the value from Schedule A/B | cotions. 11 U.S.C. § 522(b)(3) (2) Exempt, fill in the information b Amount of the exemption you Check only one box for each e. \$1,000.00 100% of fair market valuapplicable statutory limit | elow. a claim Specific laws that allow exemption semption. 735 ILCS 5/12-1001(a) |
| Brief description Brief description Used Brief description Brief description Brief description | et of exemptions are you clai are claiming state and federa are claiming federal exempti property you list on Schedule scription of the property and ichedule A/B that lists this in: d Clothes | ming? Check one only, e al nonbankruptcy exemplions. 11 U.S.C. § 522(b) of A/B that you claim as a current value of the portion you own Copy the value from Schedule A/B \$1,000.00 | exempt, fill in the information became the control of the exemption you check only one box for each exemption of the exemption of the exemption you check only one box for each exemption of fair market value. | Specific laws that allow exemption remption. 735 ILCS 5/12-1001(a) e, up to any 735 ILCS 5/12-1001(b) |

☐ No

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

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Coleman Debtor 1 Mark Case number (if known) Middle Name First Name Last Name Part 2: **Additional Page** Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you property Check only one box for each exemption. own Copy the value from Schedule A/B 735 ILCS 5/12-1001(b) Brief \$800.00 description: **✓** \$800.00 **Used Electronics** 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 735 ILCS 5/12-1001(b) Brief \$120.00 description: **✓** \$120.00 **Used Jewelry** 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 735 ILCS 5/12-1001(b) Brief \$350.00 description: **✓** \$350.00 Checking account, 100% of fair market value, up to any **Chase Bank** applicable statutory limit Line from Schedule A/B: 735 ILCS 5/12-1001(b) \$375.00 description: **✓** \$375.00 Security deposit on 100% of fair market value, up to any rental unit, Landlord **Security Deposit** applicable statutory limit Line from Schedule A/B: 735 ILCS 5/12-1001(c); 735 ILCS Brief \$9,575.00 5/12-1001(b) description: \$0 Hyundai Accent, 2016, 100% of fair market value, up to any 2016 Hyundai Accent applicable statutory limit Line from Schedule A/B: 03 Brief 735 ILCS 5/12-1001(f) \$0.00 description: \$0 Life Insurance - Through 100% of fair market value, up to any Work applicable statutory limit Line from Schedule A/B: Brief 735 ILCS 5/12-1006 \$0.00 description: \$0 Pension plan, pension

through USPS

Line from Schedule A/B:

100% of fair market value, up to any

applicable statutory limit

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| | | | DC | ocument Page 22 of 6 | 06 | | |
|------------------|--|---|---|---|---|---|--------------------------------------|
| Fill in | this inforr | mation to identify your cas | se: | | | | |
| Debto | or 1 | Mark First Name | Middle Name | Coleman Last Name | | | |
| Debto (Spous | or 2 se, if filing) | First Name | Middle Name | Last Name | | | |
| Unite | d States B | | Northern | District of Illinois | | | |
| Case (If know | number vn) | | | (State) | | | |
| Off | icial I | Form 106D | | | | | Check if this is a amended filing |
| Sc | hedu | le D: Credito | ors Who Ha | ve Claims Secure | d by Prop | ertv | 12/1 |
| more name | space is r and case Do any c | needed, copy the Additio number (if known). reditors have claims se | nal Page, fill it out, nur cured by your proper it this form to the court | e are filing together, both are equanber the entries, and attach it to the ty? with your other schedules. You hav | nis form. On the top | of any additional pag | |
| Part | 1: List | All Secured Claims | | | | | |
| 2. | separatel | y for each claim. If more th | an one creditor has a par | cured claim, list the creditor ticular claim, list the other creditors in der according to the creditor's name. | Column A Amount of claim Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
| 2.1 | ALLY FIN Creditor's PO BOX Number | Name (380901 | 2016 Hyundai Accent As of the date you file | y that secures the claim: e, the claim is: Check all that apply. | \$14,864.00 | \$9,575.00 | \$5,289.00 |
| | City | INGTON MN 55438 State ZIP Code es the debt? Check one. | Contingent Unliquidated Disputed | | | | |
| | ✓ Deb | tor 1 only | Nature of lien. Check | | | | |
| | Deb | tor 2 only tor 1 and Debtor 2 only | car loan) | made (such as mortgage or secured as tax lien, mechanic's lien) | | | |
| | and and | ast one of the debtors another | Judgment lien from | , | | | |
| | | ck if this claim relates community debt bt was 5/2015 | Other (including a | 7.170 | | | |
| | inqueros | | Last 4 digits of accou | Int number | | | |

Add the dollar value of your entries in Column A on this page. Write that number

here:

\$14,864.00

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|--|---|--|-------------------|--------------------------------|----------------------------|
| Fill in this info | ormation to identify your case: | | | | |
| Debtor 1 | Mark First Name Midd | Coleman e Name Last Name | | | |
| Debtor 2 (Spouse, if filing) | First Name Midd | e Name Last Name | | | |
| United States | Bankruptcy Court for the: Northern | District of Illinois (State) | | | |
| Case number (If known) | | | | | |
| Official F | Form 106E/F | | Chec | k if this is an | amended filing |
| Sched | ule E/F: Creditors | Who Have Unsecured Claim | าร | | 12/15 |
| Form 106A/B) claims that at the entries in known). | and on Schedule G: Executory Contra re listed in Schedule D: Creditors Who | leases that could result in a claim. Also list executory cont cts and Unexpired Leases (Official Form 106G). Do not inclu Hold Claims Secured by Property. If more space is needed, cinuation Page to this page. On the top of any additional page Claims | de any creditors | with partia u need, fill it | lly secured out, number |
| - | creditors have priority unsecured clain Go to Part 2. s. | ns against you? | | | |
| listed, id As much Continua | entify what type of claim it is. If a claim ha n as possible, list the claims in alphabetical ation Page of Part 1. If more than one crec | reditor has more than one priority unsecured claim, list the creditor is both priority and nonpriority amounts, list that claim here and sorder according to the creditor's name. If you have more than two litor holds a particular claim, list the other creditors in Part 3. Instructions for this form in the instruction booklet.) | how both priority | and nonprior | ity amounts. |
| , | , | , | Total claim | Priority amount | Nonpriority amount |
| Priority | Bankruptcy Section Creditor's Name x 64338 er Street | Last 4 digits of account number When was the debt incurred? n/a As of the date you file, the claim is: Check all that apply. | \$1,000.00 | \$1,000.00 | \$0.00 |
| | o Illinois 60664 State Zip Coo | Contingent | | | |
| | ebtor 2 only | Type of PRIORITY unsecured claim: | | | |
| | btor 1 and Debtor 2 only | ☐ Domestic support obligations✓ Taxes and certain other debts you owe the | | | |
| | neast one of the deptors and another | government Claims for death or personal injury while you wer | re | | |
| Is the | claim subject to offset? | intoxicated Other Specify | | | |

✓ No Yes Other. Specify _____

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Debtor 1 Mark Coleman Case number (if known) Middle Name First Name Last Name Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. **✓** Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of Part 2. **Total claim** 4.1 AFNI, INC \$2,031.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 3517 Number Street As of the date you file, the claim is: Check all that apply. Contingent 61702 Bloomington Illinois Unliquidated State Zip Code City Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? **V** ORIGINAL CREDITOR: AT T **✓** No Other. Specify **MOBILITY** Yes 4.2 Americash - Bankruptcy \$1,200.00 Last 4 digits of account number Nonpriority Creditor's Name Mkt Square Shop Ctr 180 S Bolingbrook Dr When was the debt incurred? Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Bolingbrook Illinois 60440 Zip Code Disputed City State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another debts Check if this claim relates to a community debt Other. Specify Pavdav Is the claim subject to offset? **✓** No Yes Archer Field Funding \$2,500.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 3601 PGA Boulevard Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Palm Beach Florida 33410 Gardens Disputed City State Zip Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. **✓** Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another debts Other. Specify _ Payday Check if this claim relates to a community debt Is the claim subject to offset? **✓** No Officiar orm 106E/F Schedule E/F: Creditors Who Have Unsecured Claims

page 2

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Debtor 1 Mark Coleman Case number (if known) Case number (if known)

| Part 2 | Your NONPRIORITY Unsecured Claims - Continuation | on Page | |
|--------|---|---|-------------|
| | After listing any entries on this page, number them beginning w | vith 4.5, followed by 4.6, and so forth. | Total claim |
| 4.4 | Bolingbrook Health Care Associates Nonpriority Creditor's Name 181 Fernwood Dr, Bolingbrook Number Street | Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent | \$100.00 |
| | Bolingbrook Illinois 60440 City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? ✓ No Yes | Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify medical | |
| 4.5 | Brittany Springs Apartment Nonpriority Creditor's Name 2504 Bordeaux Ln Number Street Naperville Illinois 60540 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? Yes | Last 4 digits of account number When was the debt incurred? | \$2,000.00 |
| 4.6 | First Rate Financial Nonpriority Creditor's Name 1507 E. 87th St. Number Street Chicago Illinois 60619 City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? ✓ No Yes | Last 4 digits of account number When was the debt incurred? | \$1,500.00 |

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Debtor 1 Mark Coleman Case number (if known) Case number (if known)

| Part 2 | Your NONPRIORITY Unsecured Claims - Continual After listing any entries on this page, number them beginning | • | Total claim | | | |
|--------|---|---|-------------------|--|--|--|
| 4.7 | Krause, Miriam | • | \$2,000.00 | | | |
| 4.7 | Nonpriority Creditor's Name 313 Emerald Ct. | — Last 4 digits of account number When was the debt incurred? n/a | \$2,000.00 | | | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | | | | |
| | - | Contingent | | | | |
| | Bolingbrook Illinois 60440 | Unliquidated | | | | |
| | City State Zip Code | Disputed | | | | |
| | Who incurred the debt? Check one. Debtor 1 only | Type of NONPRIORITY unsecured claim: | | | | |
| | Debtor 2 only | Student loans | | | | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | |
| | At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar debts | | | | |
| | Check if this claim relates to a community debt | Other. Specify Back Rent | | | | |
| | Is the claim subject to offset? No | | | | | |
| | Yes | | | | | |
| 4.8 | SYNCB/JCP Nonpriority Creditor's Name | Last 4 digits of account number 8584 | \$2,000.00 | | | |
| | PO BOX 984100 Number Street | When was the debt incurred? 12/2007 | | | | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | | | | |
| | | Contingent | | | | |
| | EL PASO Texas 79998 | Unliquidated | | | | |
| | City State Zip Code | Disputed | | | | |
| | Who incurred the debt? Check one. | Type of NONPRIORITY unsecured claim: | | | | |
| | Debtor 1 only | Student loans | | | | |
| | Debtor 2 only | Obligations arising out of a separation agreement or | | | | |
| | Debtor 1 and Debtor 2 only | divorce that you did not report as priority claims | | | | |
| | At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar debts | | | | |
| | Check if this claim relates to a community debt | Other. Specify CreditCard | | | | |
| | Is the claim subject to offset? | _ | | | | |
| | <u>✓</u> No | | | | | |
| | Yes | | | | | |
| 4.9 | SYNCB/WALMART | Last 4 digits of account number 8460 | \$1,500.00 | | | |
| | Nonpriority Creditor's Name PO BOX 981400 | When was the debt incurred? 1/2010 | | | | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | | | | |
| | | Contingent | | | | |
| | EL PASO Texas 79998 | Unliquidated | | | | |
| | City State Zip Code | Disputed | | | | |
| | Who incurred the debt? Check one. Debtor 1 only | Type of NONPRIORITY unsecured claim: | | | | |
| | Debtor 2 only | Student loans | | | | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | s priority claims | | | |
| | At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar | | | | |
| | Check if this claim relates to a community debt | debts Other. Specify CreditCard | itCard | | | |
| | Is the claim subject to offset? | V | | | | |
| | ✓ No | | | | | |
| | Yes | | | | | |

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Debtor 1 Mark Coleman Case number (if known)

| FIRST INS | me Middle Name Last Name | | | |
|--------------------------|---|---------|----------------------|--------|
| Part 4: Add t | ne Amounts for Each Type of Unsecured Claim | | | |
| | amounts of certain types of unsecured claims. This information is nounts for each type of unsecured claim. | s for s | tatistical reporting | purpos |
| | | | Total claims | |
| Total claims from Part 1 | 6a. Domestic support obligations. | 6a. | \$0.00 | |
| | 6b. Taxes and certain other debts you owe the government | 6b. | \$1,000.00 | |
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. | \$0.00 | |
| | 6d. Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$0.00 | |
| | 6e. Total. Add lines 6a through 6d. | 6e. | \$1,000.00 | |
| | | | | |
| | | | Total claims | |
| Total claims from Part 2 | 6f. Student loans | 6f. | \$0.00 | |
| | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$0.00 | |
| | 6h. Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$0.00 | |
| | 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$14,831.00 | |
| | 6i Total Add lines 6f through 6i | 6i | \$14,831.00 | |

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| Fill in this information to identify your case: | | | | |
|---|---------------------------|-------------|------------------------------|--|
| Debtor 1 | Mark | | Coleman | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois (State) | |
| Case number (If known) | | | | |

Official Form 106G

Check if this is an amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or comp | any with whom you have | the contract or lease | State what the contract or lease is for |
|-----|--|------------------------|-----------------------|---|
| 2.1 | The Retreat At Se Name 6685 Double Eag Number | <u> </u> | | Residential Lease, Debtor is Lessee, Year Lease |
| | Woodridge City | Illinois State | 60517 Zip Code | |
| 2.2 | Public Storage Name 701 Western Ave | | | Storage Lease, Debtor is Lessee, month to month storage lease |
| | Number | Street | | |
| | Glendale City | California State | 91201 Zip Code | |

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| | | Do | ισαιτιστι ταξ | gc 23 01 00 | |
|---------------------|--|--|---------------------------|---------------------|---|
| Fill in this info | rmation to identify your c | ase: | | | |
| Debtor 1 | Mark | | Coleman | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | - | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States I | Bankruptcy Court for the: | Northern | District of Illinois | | |
| Case number | | | (State) | | |
| (If known) | - | | | | |
| | | | | | Check if this is an |
| | | | | | amended filing |
| Official | Form 106H | | | | |
| | | | | | |
| Schedul | e H: Your Cod | lebtors | | | 12/15 |
| known). Answe | er every question. ave any codebtors? (If yo | tach the Additional Page | · • | | ages, write your name and case number (if |
| Idaho, Lo | uisiana, Nevada, New Mex | lived in a community pro cico, Puerto Rico, Texas, W | | | states and territories include Arizona, California, |
| | Go to line 3. | | | | |
| L Yes | | er spouse, or legal equiva | lent live with you at the | e time? | |
| | No | | | | |
| | Yes. In which community | y state or territory did you | ı live? | Fill in the name an | d current address of that person. |
| | Name of your spouse, for | ormer spouse, or legal equ | ivalent | | |
| | | | | | |
| | Number Street | | | | |
| | City | State | Zip (| Code | |
| | | | | | |

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line a again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

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| | | 200 | Jannone | . ago oo | 0.00 | |
|--|---------------------------------|---|----------------------------|------------------|----------------------------|---|
| Fill in this information | n to identify | your case: | | | | |
| Debtor 1 Mark | | | Colema | an | | |
| First Na | ame | Middle Name | Last Na | ame | - Che | eck if this is: |
| Debtor 2 (Spouse, if filing) First Na | | Middle Noves | Loot No | | _ / | An amended filing |
| (opouse, ii ming) First Na | ame | Middle Name | Last Na | | | A supplement showing post-petition chapter 1 |
| United States Bankrup the: Case number | tcy Court for | Northern | _ District of Illin (Si | nois tate) | | expenses as of the following date: |
| (If known) | | | | | ī | MM / DD / YYYY |
| Official Form | า 106l | | | | | |
| Schedule I: | Your Inc | come | | | | 12/1 |
| information about yo spouse. If more spac number (if known). A | our spouse. If se is needed, | you are separated and attach a separate sheward question. | d your spous | e is not filing | with you, do | r spouse is living with you, include not include information about your ional pages, write your name and case |
| 1. Fill in your employ | ment | | Debtor 1 | | | Debtor 2 |
| information. | | Employment status | ✓ Employ | ved | | Employed |
| If you have more th attach a separate pa | | | | nployed | | Not Employed |
| information about a employers. | • | Occupation | Supervisor | | | |
| Include part time, se self-employed work | | Employer's name | United Stat | es Postal Servic | e USPS | |
| | | Employer's address | 2591 Buss | se Rd | | |
| Occupation may income or homemaker, if it | | | Number Stre | eet | | Number Street |
| | | | Elk Grove Vlg City | Illinois | 60007 Zip Code | City State Zip Code |
| | | How long employed | 20 years 2 | | p | |
| | | there? | <u></u> | | | |
| Part 2: Give Deta | ils About M | lonthly Income | | | | |
| spouse unless you are | e separated. | | - | | - | vrite \$0 in the space. Include your non-filing |
| If you or your non-filin more space, attach a | | | combine the i | | all employers to Debtor 1 | or that person on the lines below. If you need For Debtor 2 or |
| | | ry, and commissions (before calculate what the monthly v | | 2. | \$5,486.89 | non-filing spouse |
| 3. Estimate and lis | | | | | | |
| o. <u></u> | t monthly over | time pay. | | 3. | + \$0.00 | |

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| Debtor 1 Mark | Coleman | Case number | (if | |
|---|---------------------|------------------------|-----------------------------------|-------------------------|
| First Name Middle Name | Last Name | known) For Debtor 1 | For Debtor 2 or non-filing spouse | |
| Copy line 4 here | → 4. | \$5,486.89 | 3 1,7 | |
| 5. List all payroll deductions: | | | | |
| 5a. Tax, Medicare, and Social Security deductions | 5a. | \$577.01 | | |
| 5b. Mandatory contributions for retirement plans | 5b. | \$40.99 | | |
| 5c. Voluntary contributions for retirement plans | 5c. | \$0.00 | | |
| 5d. Required repayments of retirement fund loans | 5d. | \$0.00 | | |
| 5e. Insurance | 5e. | \$652.21 | | |
| 5f. Domestic support obligations | 5f. | \$0.00 | | |
| 5g. Union dues | 5g. | \$80.17 | | |
| 5h. Other deductions. Specify: Health Savings Account | 5h. + | \$151.67 + | | |
| 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +: | | \$1,502.04 | - | |
| +5h. | 51 + 5g - 6. | \$1,302.04 | | |
| 7. Calculate total monthly take-home pay. Subtract line 6 from lin | e 4. 7. | \$3,984.85 | | |
| 8. List all other income regularly received: | | | | |
| 8a. Net income from rental property and from operating a business, profession, or farm | | | | |
| Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, an the total monthly net income. | _ | \$0.00 | | |
| 8b. Interest and dividends | 8a. 8b. | \$0.00 | | |
| 8c. Family support payments that you, a non-filing spouse, or | | ψ0.00 | | |
| dependent regularly receive Include alimony, spousal support, child support, maintenance | | | | |
| divorce settlement, and property settlement. | 8c. | \$0.00 | | |
| 8d. Unemployment compensation | 8d. | \$0.00 | | |
| 8e. Social Security | 8e. | \$0.00 | | |
| 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any noncash assistance that you receive, such as food stamps (benefit under the Supplemental Nutrition Assistance Program) or housing subsidies Specify: | | \$0.00 | | |
| On Boundary or mating manual important | 8f. | \$0.00 | | |
| 8g. Pension or retirement income | 8g. | \$0.00 | | |
| 8h. Other monthly income. Specify: | 8h. + | \$0.00 + | | |
| 9. Add all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g | + 8h. 9. | \$0.00 | | |
| 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling s | 10. spouse | \$3,984.85 + | = | \$3,984.85 |
| 11. State all other regular contributions to the expenses that you include contributions from an unmarried partner, members of you friends or relatives. Do not include any amounts already included in lines 2-10 or and | r household, your o | lependents, your roomm | | |
| Specify: | zamo mai are not a | and to pay expenses | 11 | + \$0.00 |
| | | | | Ψ0.00 |
| 12. Add the amount in the last column of line 10 to the amount Write that amount on the Summary of Schedules and Statistical S | | | | \$3,984.85 |
| | | | | Combined monthly income |
| 13. Do you expect an increase or decrease within the year after | you file this form | • | | |
| No. | | | | |
| Yes. Explain: | | | | |
| | | | | |

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| | | Docu | iment Page 32 of 66 | 5 | | |
|---------------------------------|-------------------------------------|--|---|---|------------------------|---------------------|
| Fill in this infor | mation to identify | your case: | | | | |
| Debtor 1 | Mark | | Coleman | | | |
| Debtor 2 | First Name | Middle Name | Last Name | Check if this is: | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | An amended fili | ng | |
| United States E | Bankruptcy Court fo | or the: Northern I | District of Illinois | A supplement s expenses as of | | petition chapter 13 |
| Case number | | | (State) | 0,0000000000000000000000000000000000000 | and rollowing d | iaco. |
| (If known) | | | | MM / DD / YYY | Y | |
| Official | Form 106 | 6J | | | | |
| Schedul | e J: Your E | Expenses | | | | 12/15 |
| information. If (if known). Ans | | | | | | |
| 1. Is this a join | nt case? | | | | | |
| ✓ No. Go | to line 2 | | | | | |
| Yes. Do | oes Debtor 2 live i | in a separate household? | | | | |
| | No | | | | | |
| | Yes. Debtor 2 m | nust file Official Forms 106J-2, <i>Exper</i> | nses for Separate Household of Debi | for 2. | | |
| 2. Do you have | e dependents? | No | | | | |
| Do not list D Debtor 2. | ebtor 1 and | Yes. Fill out this information for each dependent | Dependent's relationship to Debtor 1 or Debtor 2 | Dependent's age | Does depe with you? | endent live |
| | | | Child | | No. | |
| | | | | | ✓ Yes. | |
| | enses include f people other | ✓ No | | | | |
| than yourself and | | Yes | | | | |
| dependents | - | | | | | |
| Part 2: Estin | mate Your Ongo | oing Monthly Expenses | | | | |
| _ | of a date after the | our bankruptcy filing date unless y bankruptcy is filed. If this is a sup | • | • | • | |
| | • | non-cash government assistance ided it on Schedule I: Your Income | - | | · | Your expenses |
| | or home ownershor the ground or lot | nip expenses for your residence. In . 4. | nclude first mortgage payments and | | 4. | \$1,500.00 |
| If not incl | uded in line 4: | | | | | |
| 4a. Real es | state taxes | | | | 4a | \$0.00 |

\$12.00

\$0.00

\$0.00

4b.

4c.

4d.

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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Debtor 1 Mark Coleman Case number (if known)
First Name Middle Name Last Name

| 5. Additional mortgage payments for your residence, such as home equity loans 5. \$0.00 5. Utilities: 6. Utilities: 6. \$214.00 6b. Water, sewer, garbage collection 6b. \$0.00 6c. Telephone, oil phone, Internet, statilita, and cable services 6c. \$102.00 6d. Other, Specify: Celiphones 6d \$109.00 7. Food and housekeeping supplies 7. \$600.00 8. Childcare and children's education costs 8. \$0.00 9. Clothing, Jaundry, and dry cleaning 9. \$142.00 10. Personal care products and services 11. \$66.00 11. Medical and dental expenses 11. \$86.00 12. Transportation, include gas, maintramore, bus or train fare. 12. \$375.00 Do not include car payments 14. \$9.00 14. Charitable contributions and religious donations 14. \$9.00 15. Instration, clubs, recreation, newspapers, magazines, and books 15. \$9.00 15. Live insurance. 15a \$9.00 15. Live insurance. 15a \$9.00 15. | First Name | Middle Name Last Nam | 9 | | |
|--|-----------------------------------|--|--------------------------------|-----|---------------|
| Section Sect | | | | | Your expenses |
| 6a. Electricity, heat, natural gas 6a. \$214.00 6b. Water, sewer, garbage collection 6b. \$0.00 6c. Telephone, cell phone, intermed, stabilite, and cable services 6c. \$162.00 6d. Other. Specify: Celiphones 6d. \$108.00 7. Food and housekeeping supplies 7. \$600.00 8. Childcare and children's education costs 9. \$142.00 9. Clothing, laundry, and dry cleaning 9. \$142.00 10. Personal care products and services 11. \$860.00 11. Medical and dental exponses 11. \$860.00 11. Medical and dental exponses 12. \$375.00 Do not include anyments 12. \$375.00 14. Charitable contributions and religious donations 13. \$0.00 15. Instrationment, clubs, recreation, newspapers, magazines, and books 15. \$0.00 15. Instration and religious donations 14. \$0.00 15. Instration and religious donations 15. \$0.00 15. Life insurance. 15. \$0.00 15. Life insurance. 15. \$0.00 | 5. Additional mortgage payme | ents for your residence, such as home equit | y loans | 5. | \$0.00 |
| 6b. Water, sewer, garbage collection 6b. \$0.00 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$162.00 6d. Other, Specify: Cellphones 7. \$600.00 7. Food and housekceping supplies 7. \$600.00 8. Childcare and children's education costs 8. \$0.00 9. Childcare and children's education costs 8. \$0.00 9. Childcare and drid express 10. \$110.00 11. Medical and dental expenses 11. \$860.00 12. Transportation. Include gas, maintenance, bus or train fare. 12. \$375.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$0.00 14. Charitable contributions and religious donations 15. \$0.00 15. Insurance 15 \$0.00 15a. Life insurance deducted from your pay or included in lines 4 or 20. 15a \$0.00 15c. Vehicle insurance 15a \$0.00 15c. Vehicle insurance 15a \$0.00 15c. Vehicle insurance. Specify: 15a \$0.00 17. Testall ment or lease payments. 17a | 6. Utilities: | | | | |
| 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$162.00 6d. Other. Specify: Cellphones 6d. \$108.00 7. Food and housekeeping supplies 7. \$600.00 8. Childcare and children's education costs 8. \$00.00 9. Clothing, laundry, and dry cleaning 9. \$142.00 10. Personal care products and services 10. \$110.00 11. Medical and dental expenses 11. \$66.00 12. Transportation. Include gas, maintenance, bus or train fare. 12. \$375.00 Do not include serverseitor, newspapers, magazines, and books 13. \$0.00 14. Charitable contributions and religious donations 14. \$0.00 15. Instrance. 15. \$0.00 15. Let insurance 15. \$0.00 15. Let will insurance 15. \$0.00 15. Let will insurance. | 6a. Electricity, heat, natural ga | as | | 6a. | \$214.00 |
| 6d. Other. Specify_Celiphones 6d \$10.00 7. Food and housekeeping supplies 7. \$60.00 8. Childcare and children's education costs 8. \$0.00 9. Clothing, laundry, and dry cleaning 9. \$142.00 10. Personal care products and services 10. \$11.00 11. Medical and dental expenses 11. \$66.00 12. Transportation, Include gas, maintenance, bus or train fare. 12. \$375.00 Do not include car payments 13. \$0.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$0.00 14. Charitable contributions and religious donations 15. \$0.00 15. Insurance. 15 \$0.00 15. List insurance deducted from your pay or included in lines 4 or 20. 15 \$0.00 15. Lealth insurance 15 \$0.00 15. Health insurance 15 \$0.00 15. Lealth insurance. Specify: 16 \$0.00 15. Taxes, Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 17. Installment or lease payments: 17 \$0.00 | 6b. Water, sewer, garbage co | llection | | 6b. | \$0.00 |
| 7. Food and housekeeping supplies 7. \$800.00 8. Childcare and childcare's education costs 8. \$0.00 9. Clothing, laundry, and dry cleaning 9. \$142.00 10. Personal care products and services 10. \$110.00 11. Medical and dental expenses 11. \$866.00 12. Transportation, Include gas, maintenance, bus or train fare. 12. \$375.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$0.00 14. Charitable contributions and religious donations 14. \$0.00 15. Insurance. 15s \$0.00 15b. Health insurance deducted from your pay or included in lines 4 or 20. 15s \$0.00 15c. Vehicle insurance. Specify: 15c \$0.00 15c. Vehicle insurance. Specify: 15c <t< td=""><td>6c. Telephone, cell phone, In</td><td>ternet, satellite, and cable services</td><td></td><td>6c.</td><td>\$162.00</td></t<> | 6c. Telephone, cell phone, In | ternet, satellite, and cable services | | 6c. | \$162.00 |
| 8. Childcare and children's education costs 8. \$0.00 9. Clothing, laundry, and dry cleaning 9. \$142.00 10. Personal care products and services 10. \$110.00 11. Medical and dental expenses 11. \$66.00 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 12. \$375.00 14. Charitable contributions and religious donations 14. \$0.00 15. Insurance. 15a \$0.00 15a. Life insurance deducted from your pay or included in lines 4 or 20. 15a \$0.00 15b. Health insurance 15a \$0.00 15c. Vehicle insurance. 15c \$120.00 15d. Other insurance. Specify: 15c \$0.00 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 \$pecify: \$0.00 \$0.00 17. Installment or lease payments: 17a \$0.00 17a. Car payments for Vehicle 1 17a \$0.00 17c. Other. Specify: 17c \$0.00 17c. Other. Specify: 17c \$0.00 17c. | 6d. Other. Specify: Cellphor | nes | | 6d | \$108.00 |
| 9. Clothing, laundry, and dry cleaning 9. \$142.00 10. Personal care products and services 10. \$110.00 11. Medical and dental expenses 11. \$66.00 12. Transportation, Include gas, maintenance, bus or train fare. 12. \$375.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$0.00 14. Charitable contributions and religious donations 14. \$0.00 15. Insurance. 15. \$0.00 15. Insurance. 155. \$0.00 15. Lie insurance deducted from your pay or included in lines 4 or 20. 156. \$0.00 15. Vehicle insurance 156 \$0.00 15. Vehicle insurance. 150 \$0.00 15. Vehicle insurance deducted from your pay or included in lines 4 or | 7. Food and housekeeping sup | pplies | | 7. | \$600.00 |
| 10. Personal care products and services 10. \$11.00 11. Medical and dental expenses 11. \$68.00 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 12. \$375.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$0.00 14. Charitable contributions and religious donations 14. \$0.00 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a \$0.00 15a. Life insurance 15a \$0.00 15b. Health insurance 15c \$120.00 15c. Vehicle insurance 15c \$0.00 15c. Vehicle insurance. Specify: 15c \$0.00 15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 17c. Installment or lease payments. 17c \$0.00 17b. Car payments for Vehicle 1 17c \$0.00 17c. Other. Specify: 17c \$1.2c | 8. Childcare and children's ed | ucation costs | | 8. | \$0.00 |
| 11. Medical and dental expenses 11. \$66.00 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 12. \$375.00 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 13. \$30.00 14. Charitable contributions and religious donations 14. \$0.00 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a \$0.00 15b. Health insurance 15b. Health insurance 15c. Vehicle insurance 17c. Other. Specify: Specify | 9. Clothing, laundry, and dry o | leaning | | 9. | \$142.00 |
| 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 12. \$375.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. 14. \$0.00 14. Charitable contributions and religious donations 14. \$0.00 15. Insurance. | 10. Personal care products ar | nd services | | 10. | \$110.00 |
| Do not included car payments 13. | 11. Medical and dental expen | ses | | 11. | \$66.00 |
| 14. Charitable contributions and religious donations 14. \$0.00 15. Insurance. 30.00 Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. \$0.00 15b. Health insurance 15b. \$0.00 15b. Chelath insurance 15c. \$120.00 15c. Vehicle insurance. Specify: 15d. \$0.00 \$0.00 15d. Other insurance. Specify: 15d. \$0.00 \$0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 \$0.00 17. Installment or lease payments: 16 \$0.00 17. Installment or lease payments: 17a. \$0.00 \$0.00 17b. Car payments for Vehicle 1 17a. \$0.00 \$0.00 17c. Other. Specify: 17c. \$125.00 \$0.00 17c. Other. Specify: 17c. \$125.00 \$0.00 17c. Other. Specify: 17d. \$0.00 \$0.00 18. Your payments of allimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. \$0.00 Specify: 19. \$0.00 20a. Mortgages on other property 20a. \$0.00 | | | | 12. | \$375.00 |
| 15. Insurance. | 13. Entertainment, clubs, reci | eation, newspapers, magazines, and book | s | 13. | \$0.00 |
| Do not include insurance deducted from your pay or included in lines 4 or 20. | 14. Charitable contributions a | nd religious donations | | 14. | \$0.00 |
| 15b Health insurance 15b \$0.000 15c. Vehicle insurance 15c \$120.000 15c. Vehicle insurance 15c \$120.000 15d. Other insurance. Specify: | | lucted from your pay or included in lines 4 or | 20. | | |
| 15c. Vehicle insurance | 15a. Life insurance | | | 15a | \$0.00 |
| 15d. Other insurance. Specify: | 15b. Health insurance | | | 15b | \$0.00 |
| 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: | 15c. Vehicle insurance | | | 15c | \$120.00 |
| Specify: | 15d. Other insurance. Specify | / <u>:</u> | | 15d | \$0.00 |
| 16 | 16. Taxes. Do not include taxes | deducted from your pay or included in lines | 4 or 20. | | |
| 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a. Car payments for Vehicle 2 17b. Car payments for Vehicle 2 17c. Other. Specify: Storage Unit 17d. Other. Specify: Storage Unit 17d. Other. Specify: 17d. Other. Specify: 17d. Storage Unit 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. Other payments you make to support others who do not live with you. Specify: 19. \$0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a \$0.00 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00 | Specify: | | - | 16 | \$0.00 |
| 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17b. Car payments for Vehicle 2 17c. Other. Specify: Storage Unit 17c. Other. Specify: Storage Unit 17d. Other. Specify: 17d. Storage Unit 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: 19. \$0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a \$0.00 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20c. \$0.00 20d. Maintenance, repair, and upkeep expenses. 20d \$0.00 | 17. Installment or lease paym | ents: | | 10 | |
| 17c. Other. Specify: Storage Unit 17c. Other. Specify: Storage Unit 17d. Other. Specify: 17d. \$0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: 19. \$0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. Mortgages on other property 20b. Real estate taxes. 20b. \$0.00 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00 | | | | 17a | \$0.00 |
| 17d. Other. Specify: 17d \$0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: 19. \$0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20c \$0.00 20d. Maintenance, repair, and upkeep expenses. 20d \$0.00 | 17b. Car payments for Vehic | e 2 | | 17b | \$0.00 |
| 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other payments you make to support others who do not live with you. Specify: 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$0.00 20b. Real estate taxes. 20b. \$0.00 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00 | 17c. Other. Specify: Storage | e Unit | | 17c | \$125.00 |
| your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other payments you make to support others who do not live with you. Specify: 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a \$0.00 20b. Real estate taxes. 20c \$0.00 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d \$0.00 | 17d. Other. Specify: | | | 17d | \$0.00 |
| 19. Other payments you make to support others who do not live with you. Specify: 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a \$0.00 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20c \$0.00 20d. Maintenance, repair, and upkeep expenses. 20d \$0.00 | | | ot report as deducted from | | \$0.00 |
| Specify: | | , | | 18. | |
| 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes. 20b. Property, homeowner's, or renter's insurance 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00 | | to support others who do not live with you | J. | 40 | 40.00 |
| 20a. Mortgages on other property 20a. Mortgages on other property 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20c. Maintenance, repair, and upkeep expenses. 20d \$0.00 | | as not included in lines 4 or 5 of this form | or on Schodula I. Vour Income | 19. | \$0.00 |
| 20b. Real estate taxes. 20b. \$0.00 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00 | , , , , | | of off Schedule I. Tour meome. | 20a | \$0.00 |
| 20c. Property, homeowner's, or renter's insurance 20c \$0.00 20d. Maintenance, repair, and upkeep expenses. 20d \$0.00 | | | | | |
| 20d. Maintenance, repair, and upkeep expenses. 20d \$0.00 | | or renter's insurance | | | |
| | | | | | |
| | | | | | |

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| Debtor 1 Mark | | | Coleman | Case number (if known) | | |
|-----------------------|------------------------|---------------------------|--|------------------------|-----|------------|
| First N | | Middle Name | Last Name | | | |
| 21. Other. Spe | cify: | | | | 21 | \$0.00 |
| | | | | | | |
| | your monthly expens | ses. | | | | \$3,534.00 |
| | es 4 through 21. | | | | | \$0.00 |
| . , | , , , , | ,, ,, | from Official Form 106J-2 | | | \$3,534.00 |
| 22c. Add lin | e 22a and 22b. The re | esult is your monthly exp | enses. | | 22. | |
| 23. Calculate | our monthly net inc | ome. | | | | |
| 23a. Copy I | ine 12 (your combined | d monthly income) from S | Schedule I. | | 23a | \$3,984.85 |
| 23b. Copy | your monthly expense | es from line 22 above. | | | 23b | \$3,534.00 |
| 23c. Subtra | ct your monthly exper | nses from your monthly in | ncome. | | | \$450.85 |
| The re | sult is your monthly n | et income. | | | 23c | · |
| | | | oan within the year or do yo nodification to the terms of | | | |

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| Fill in this infor | mation to identify your ca | ase: | | |
|------------------------|----------------------------|-------------|------------------------------|--|
| Debtor 1 | Mark | | Coleman | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois (State) | |
| Case number (If known) | | | | |

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | t 1: Sign Below | |
|-----|--|---|
| | Did you pay or agree to pay someone who is NOT an attorney to h | help you fill out bankruptcy forms? |
| | ✓ No | |
| | Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| | | |
| | | |
| | Under penalty of perjury, I declare that I have read the summary | and schedules filed with this declaration and |
| | that they are true and correct. | |
| × | /s/ Mark Coleman | x |
| | Signature of Debtor 1 | Signature of Debtor 2 |
| | Date 9/21/2017 | Date |
| | MM/DD/YYYY | MM/DD/YYYY |

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| Fill in th | is information to i | adrially your t | | | | | | |
|------------------------|--|--|---------------------|---|---|--|----------|---|
| Debtor 1 | I Mark | | | C | oleman | | | |
| | First Nam | ie | Middle I | | ast Name | | | |
| Debtor 2 (Spouse, i | | 1e | Middle I | Name L | ast Name | _ | | |
| United S | States Bankruptcy | Court for the: | Northern | District | of Illinois | _ | | |
| Case nu | mber | | | | (State) | | | |
| (If known) | | | | | | | | Check if this is a |
| Offic | ial Form | 107 | | | | | | amended filing |
| State | ement of F | Financia | al Affairs f | or Individu | als Filing fo | or Bankru | intcv | 04/1 |
| informa | | ace is need | ed, attach a sep | | filing together, bo | | | supplying correct your name and case |
| Part 1: | Give Details | About Your | Marital Status | and Where You | Lived Before | | | |
| 1. W | hat is your curre | nt marital st | atus? | | | | | |
| Ī. | Married | | | | | | | |
| | | | | | | | | |
| | Not married | | | | | | | |
| 2. D | _ | ears, have y | ou lived anywherd | e other than where | e you live now? | | | |
| 2. D | _ | ears, have y | ou lived anywhere | e other than where | e you live now? | | | |
| 2. D | uring the last 3 y | | | | e you live now? nclude where you live | e now. | | |
| 2. D | uring the last 3 y | | | | | e now. | | |
| 2. D | uring the last 3 y | | | | nclude where you live | | | Dates Debtor 2 lived there |
| 2. D | uring the last 3 y No Yes. List all of | | | at 3 years. Do not in | nclude where you live | | | there |
| 2. D | uring the last 3 y No Yes. List all of | | | at 3 years. Do not in | nclude where you live | | | |
| 2. D | uring the last 3 y No Yes. List all of | the places you | | at 3 years. Do not in | lived Debtor 2: | e as Debtor 1 | | there |
| 2. D | uring the last 3 y No Yes. List all of Debtor 1: | the places you | | Dates Debtor 1 | lived Debtor 2: | e as Debtor 1 | | there Same as Debtor 1 |
| 2. D | uring the last 3 y No Yes. List all of Debtor 1: 2508 Bordeau Number Street Naperville | the places you x Ln Apt 107 Illinois | ou lived in the las | Dates Debtor 1 there | lived Debtor 2: Same | e as Debtor 1 Street | | there Same as Debtor 1 From |
| 2. D | wring the last 3 y No Yes. List all of Debtor 1: 2508 Bordeau Number Street | the places you | ou lived in the las | Dates Debtor 1 there | lived Debtor 2: Same Number S | as Debtor 1 Street | Zip Code | there Same as Debtor 1 From To |
| 2. D | uring the last 3 y No Yes. List all of Debtor 1: 2508 Bordeau Number Street Naperville City | x Ln Apt 107 Illinois State | ou lived in the las | Dates Debtor 1 there | lived Debtor 2: Same Number S | e as Debtor 1 Street | Zip Code | there Same as Debtor 1 From |
| 2. D | uring the last 3 y No Yes. List all of Debtor 1: 2508 Bordeau Number Street Naperville | x Ln Apt 107 Illinois State | ou lived in the las | Dates Debtor 1 there | lived Debtor 2: Same Number S | e as Debtor 1 Street State e as Debtor 1 | Zip Code | there Same as Debtor 1 From To |
| 2. D | No Yes. List all of Debtor 1: 2508 Bordeau Number Street Naperville City 313 Emerald C | x Ln Apt 107 Illinois State | ou lived in the las | Dates Debtor 1 there From 08/2016 To 07/2017 | Iived Debtor 2: Same Number S City Number S | e as Debtor 1 Street State e as Debtor 1 | Zip Code | there Same as Debtor 1 From To Same as Debtor 1 |
| 2. D | No Yes. List all of Debtor 1: 2508 Bordeau Number Street Naperville City 313 Emerald C | x Ln Apt 107 Illinois State | ou lived in the las | ### Dates Debtor 1 there From | Iived Debtor 2: Same Number S City Number S | e as Debtor 1 Street State e as Debtor 1 | Zip Code | there Same as Debtor 1 From To Same as Debtor 1 From From |

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Coleman Debtor 1 Mark Case number (if known) Middle Name First Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income Sources of income **Gross income Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) ✓ Wages, Wages, \$51394.98 From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages, \$65000.00 Wages, For last calendar year: commissions, commissions, 2016 (January 1 to December 31, bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, \$65000.00 For the calendar year before that: commissions. commissions. (January 1 to December 31, 2015) bonuses, tips bonuses, tips Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Sources of income Gross income from Gross income from Describe below. each source Describe below. each source (before deductions and (before deductions and exclusions) exclusions) From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31, 2016 For the calendar year before that: (January 1 to December 31, 2015

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Coleman Debtor 1 Mark __ Case number (if known) Middle Name First Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors

Other

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| nsider? | or 1 | Mark | | | Co | oleman | Case number | (if known) |
|---|---------------------|---|--|--|---|--|--|---|
| insider include your relatives; any general partners; relatives of any general partners; partnerships of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing gent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. Dates of payment Insider's Name Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? No Yes. List all payments that benefited an insider. Dates of payments or transfer any property on account of a debt that benefited an insider? No Yes. List all payments that benefited an insider. Dates of payment Total amount paid Reason for this payment include creditor's name Insider's Name Number Street Dates of Total amount payments or transfer any property on account of a debt that benefited an insider? City State Zip Code Insider's Name Number Street Dates of Total amount paid Reason for this payment include creditor's name | | First Name | | Middle Name | Las | st Name | | |
| Ves. List all payments to an insider. Dates of payment Total amount you still owe | nsio orp igei | ders include your porations of whic nt, including one | r relatives; a h you are a for a busir | any general partners an officer, director, ness you operate as | s; relatives of any person in control, | general partners; part or owner of 20% or | tnerships of which y more of their voting | ou are a general partner; g securities; and any managing |
| Yes. List all payments to an insider. Dates of payment Total amount paid Amount you still owe Reason for this payment | ✓ | No | | | | | | |
| Insider's Name Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. No Yes. List all payments that benefited an insider. Dates of payment paid Total amount paid Amount you still owe Insider's Name Number Street City State Zip Code Total amount paid Reason for this payment Include creditor's name | Ħ | Yes. List all pay | yments to | an insider. | | | | |
| Number Street City State Zip Code | _ | | | | | | | Reason for this payment |
| City State Zip Code Insider's Name Number Street | | Insider's Name | | | | · | | |
| Insider's Name Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. No Yes. List all payments that benefited an insider. Dates of payment paid Amount you still owe Include creditor's name Insider's Name Number Street City State Zip Code Insider's Name | | Number Street | | | | | | |
| Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. No Yes. List all payments that benefited an insider. Dates of payment Paid Amount you still owe Reason for this payment Include creditor's name Insider's Name Number Street City State Zip Code | | City | State | Zip Code | | | | |
| City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. No Yes. List all payments that benefited an insider. Dates of payment Dates of payment Dates of payment Insider's Name Number Street City State Zip Code Insider's Name | | Insider's Name | | | | | | |
| Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. No Yes. List all payments that benefited an insider. Dates of payment Dates of payment Insider's Name Number Street City State Zip Code Insider's Name | | Number Street | | | | | | |
| Yes. List all payments that benefited an insider. Dates of payment Dates of payment Total amount you still owe Insider's Name City State Zip Code Insider's Name | | City | State | Zip Code | | | | |
| Number Street City State Zip Code Insider's Name | | ude payments or No | | _ | ider. Dates of | | - | |
| City State Zip Code Insider's Name | | Insider's Name | | | | | | |
| Insider's Name | | Number Street | | | | | | |
| | _ | City | State | Zip Code | | | | |
| Number Street | | Insider's Name | | | | | | |
| | | Number Street | | | | | | |
| City State Zip Code | | City | State | Zin Code | | | | |

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Coleman Debtor 1 Mark Case number (if known) Middle Name First Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No ◪ Yes. Fill in the details. Status of the case Nature of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property 2016 Hyundai Accent 09/19/2017 \$0 ALLY FINANCIAL Creditor's Name Explain what happened PO BOX 380901 Number Street Property was repossessed. Property was foreclosed. BLOOMINGTON Minnesota 55438 Property was garnished. State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code

Property was attached, seized, or levied.

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| Debt | tor 1 Mark | Coleman | Case number (if known) | |
|------|---|-----------------------------|---|------------------------|
| | First Name Middle Name | Last Name | | |
| 11. | Within 90 days before you filed for bankruptcy, did accounts or refuse to make a payment because you | | pank or financial institution, set off any am | ounts from your |
| | Yes. Fill in the details. | | | |
| | | Describe the action th | e creditor took Date action was taken | Amount |
| | Creditor's Name | | | - |
| | Number Street | | | |
| | | Last 4 digits of account | number: XXXX- | |
| | City State Zip Code | | | |
| 12. | Within 1 year before you filed for bankruptcy, was a appointed receiver, a custodian, or another official | | possession of an assignee for the benefit o | of creditors, a court- |
| | ✓ No | | | |
| | Yes | | | |
| Part | 5: List Certain Gifts and Contributions | | | |
| 13. | Within 2 years before you filed for bankruptcy, did | you give any gifts with a t | otal value of more than \$600 per person? | |
| | ✓ No Yes. Fill in the details for each gift. | | | |
| | Gifts with a total value of more than \$600 per person | Describe the gifts | Dates you gave the gifts | Value |
| | | | | |
| | Person to Whom You Gave the Gift | | | |
| | Number Street | | | |
| | City State Zip Code | | | |
| | Person's relationship to you | | | |
| | Person to Whom You Gave the Gift | | | _ |
| | | | | |
| | Number Street | | | |
| | City State Zip Code | | | |
| | Person's relationship to you | | | |

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| | Mark | Coleman Case number (if kno | own) | |
|------------|---|---|---------------------------------------|---------------------|
| | First Name Middle Name | Last Name | | |
| | | | | |
| . Wi | thin 2 years before you filed for bankruptcy, di | d you give any gifts or contributions with a total value | of more than \$600 | to any charity? |
| ✓ | No | | | |
| | Yes. Fill in the details for each gift or contribu | ition. | | |
| _ | - | | B. I. | W.L. |
| | Gifts or contributions to charities that total more than \$600 | Describe what you contributed | Date you contributed | Value |
| | that total more than \$000 | | Contributed | |
| | | _ | | |
| | Charity's Name | | | |
| | | _ | | |
| | | _ | | |
| | Number Street | | | |
| | 0:: | _ | | |
| | City State Zip Code | | | |
| rt 6: | List Certain Losses | | | |
| . 0. | 2.01 00.14 200000 | | | |
| | No Yes. Fill in the details. Describe the property you lost and how the loss occurred | Describe any insurance coverage for the loss Include the amount that insurance has paid. List | Date of your loss | Value of property |
| | now the loss occurred | pending insurance claims on line 33 of <i>Schedule</i> A/B: Property. | 1055 | 1051 |
| | | | | |
| | | | | |
| rt 7: | List Certain Payments or Transfers | | | |
| abo | out seeking bankruptcy or preparing a bankru | | | anyone you consulte |
| abo Inc | out seeking bankruptcy or preparing a bankru lude any attorneys, bankruptcy petition preparers, No | | | anyone you consulte |
| abo | out seeking bankruptcy or preparing a bankru lude any attorneys, bankruptcy petition preparers, | ptcy petition? | | anyone you consulte |
| Inc | out seeking bankruptcy or preparing a bankru lude any attorneys, bankruptcy petition preparers, No | ptcy petition? | bankruptcy. Date payment or transfer | Amount of payment |
| abo Inc | out seeking bankruptcy or preparing a bankru lude any attorneys, bankruptcy petition preparers, No Yes. Fill in the details. | ptcy petition? or credit counseling agencies for services required in your Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
| abo Inc | out seeking bankruptcy or preparing a bankru lude any attorneys, bankruptcy petition preparers, No Yes. Fill in the details. Semrad Law Firm | ptcy petition? or credit counseling agencies for services required in your Description and value of any property | bankruptcy. Date payment or transfer | Amount of |
| abo Inc | out seeking bankruptcy or preparing a bankru lude any attorneys, bankruptcy petition preparers, No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid | ptcy petition? or credit counseling agencies for services required in your Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
| abo Inc | out seeking bankruptcy or preparing a bankru lude any attorneys, bankruptcy petition preparers, No Yes. Fill in the details. Semrad Law Firm | ptcy petition? or credit counseling agencies for services required in your Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
| abo Inc | but seeking bankruptcy or preparing a bankru lude any attorneys, bankruptcy petition preparers, No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street | ptcy petition? or credit counseling agencies for services required in your Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
| abo Inc | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor | ptcy petition? or credit counseling agencies for services required in your Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
| abo Inc | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 | ptcy petition? or credit counseling agencies for services required in your Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
| abo Inc | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor | ptcy petition? or credit counseling agencies for services required in your Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
| Inc | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 | ptcy petition? or credit counseling agencies for services required in your Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
| Inc | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address | ptcy petition? or credit counseling agencies for services required in your Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
| Inc | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code | ptcy petition? or credit counseling agencies for services required in your Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
| Inc | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address | ptcy petition? or credit counseling agencies for services required in your Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
| Inc | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid | ptcy petition? or credit counseling agencies for services required in your Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
| Inc | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address Person Who Made the Payment, if Not You | ptcy petition? or credit counseling agencies for services required in your Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
| Inc | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid | ptcy petition? or credit counseling agencies for services required in your Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
| Inc | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid | ptcy petition? or credit counseling agencies for services required in your Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
| Inc | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid | ptcy petition? or credit counseling agencies for services required in your Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
| Inc | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address Person Who Was Paid Number Street City State Zip Code | ptcy petition? or credit counseling agencies for services required in your Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
| abo Inc | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid | ptcy petition? or credit counseling agencies for services required in your Description and value of any property transferred | Date payment or transfer was made | Amount of payment |

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| Debt | or 1 | Mark | | Coleman | Case | number <i>(if known)</i> | | | |
|------|-------------|--|---|--|--------------|--------------------------|--|---------|------------------------------|
| | | First Name | Middle Name | Last Name | | | | | |
| 17. | help | hin 1 year before you filed o you deal with your credit not include any payment or t | ors or to make paym | | our behalf | pay or transfer | any property to a | anyone | who promised to |
| | | No Yes. Fill in the details. | | | | | | | |
| | | | | Description and value of a transferred | ny propert | у | Date payment or transfer was made | Amou | unt of payment |
| | | Person Who Was Paid | | - | | | | | |
| | | Number Street | | • | | | | | |
| | | City State | Zip Code | · | | | | | |
| 18. | the Incl | ordinary course of your bu | siness or financial and transfers made as s | security (such as the granting of | - | | | | |
| | _ | | | Description and value of patransferred | property | | y property or ceived or debts p | oaid | Date transfer was made |
| | | Person Who Received Trans | sfer | | | | | | |
| | | Number Street | | | | | | | |
| | | City State Person's relationship to you | Zip Code J | | | | | | |
| | | Person Who Received Trans | sfer | • | | | | | |
| | | Number Street | | | | | | | |
| | | City State Person's relationship to you | Zip Code | | | | | | |
| 19. | ben | eficiary? ese are often called asset-pro | | d you transfer any property to | a self-settl | ed trust or sim | ilar device of whi | ich you | are a |
| | | Yes. Fill in the details. | | Description and value of | the proper | ty transferred | | | Date transfer was made |
| | | Name of trust | | | | | | | |

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Coleman Debtor 1 Mark Case number (if known) Middle Name First Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was before number instrument closed, sold, closing or moved, or transfer transferred Checking XXXX-Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? Public Storage Furniture No Name of Storage Facility Name 701 Western Ave Number Street Number Street City State Zip Code Glendale California 91201

City

Zip Code

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Coleman Debtor 1 Mark Case number (if known) Middle Name First Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code Zip Code City State Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street NumberStreet City State Zip Code City State Zip Code

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| Deb | tor 1 | | | | Colen | | Ca | se number <i>(i</i> | f known) | |
|-----|----------|----------------------|------------------|-------------------|-------------------|-------------|--------------------|---------------------|---|--------------------|
| | | First Name | | Middle Name | Last N | ame | | | | |
| 26. | Hav | e you been a part | y in any judic | ial or administı | rative proceedi | ing under | any environme | ntal law? Ir | nclude settlements and orde | ers. |
| | ✓ | No | | | | | | | | |
| | | Yes. Fill in the det | tails. | | | | | | | |
| | | | | | Court or agend | су | | Nature | of the case | Status of the case |
| | | Case title | | | Court Name | | | | | Pending |
| | | | | | Court Name | | | | | On appeal |
| | | Case number | | | NumberStreet | | | | | Concluded |
| | | _ | | | City | State | Zip Code | | | |
| Par | 11: | Give Details Al | bout Your B | usiness or Co | onnections to | Any Bu | siness | | | |
| 27. | Witl | nin 4 years before | you filed for I | bankruptcy, dic | d you own a bu | siness or | have any of the | following | connections to any business | 9. |
| | | □ A solo propri | iotor or colf-or | mployed in a tr | ada profossion | or othou | r activity, either | full-time or i | part_timo | |
| | | | | | • • | | • | ruii-urrie or į | part-ume | |
| | | | | | LC) or iimited | паршіу ра | artnership (LLP) | | | |
| | | | a partnership | | _ | | | | | |
| | | | | naging executiv | - | | | | | |
| | | An owner of | at least 5% of | f the voting or e | equity securities | s of a corp | poration | | | |
| | V | No. None of the a | above applies | s. Go to Part 12 | | | | | | |
| | Ħ | Yes. Check all tha | | | | for each t | ousiness. | | | |
| | | | , | | | | ure of the busin | ess | Employer Identification n | umber Do not |
| | | | | | 2000 | , | | | include Social Security n | |
| | | | | | _ | | | | EIN: | |
| | | Business Name | | | | | | | | |
| | | Number Street | | | _ | | | | Dates business existed | |
| | | | | | Name of | account | ant or bookkee | per | | |
| | | City | State | Zip Code | | | | | From To | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | Describe | the natu | ure of the busin | ess | Employer Identification n include Social Security n | |
| | | | | | | | | | EIN: | |
| | | Business Name | | | | | | | 2.11. | |
| | | Number Street | | | _ | | | | Dates business existed | |
| | | City | State | Zip Code | Name of | account | ant or bookkee | per | Face To | |
| | | Oity | State | zip code | | | | | From To | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | Describe | the natu | ure of the busin | ess | Employer Identification n include Social Security n | |
| | | | | | | | | | EIN: | |
| | | Business Name | | | | | | | | |
| | | Number Street | | | Name of | i account | ant or bookkee | per | Dates business existed | |
| | | City | State | Zip Code | | | J. DOJANGE | | FromTo | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |

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| Deb | tor 1 Mark | | Coleman | Case number (if known) |
|------|---|---------------------------|-------------------------------|---|
| | First Name | Middle Name | Last Name | |
| 28. | Within 2 years before you file creditors, or other parties. | ed for bankruptcy, did y | ou give a financial stateme | nt to anyone about your business? Include all financial institutions, |
| | Yes. Fill in the details be | low. | | |
| | _ | | Date issued | |
| | Name | | MM/DD/YYYY | |
| | | | | |
| | Number Street | | _ | |
| | City State | e Zip Code | _ | |
| Pari | t 12: Sign Below | | | |
| | | in fines up to \$250,000, | , | ty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | Signature of E | | | Signature of Debtor 2 |
| | Date 9/21/20 | .17 | | Date |
| | Date 9/21/20 | 117 | | |
| I | Did you attach additional pag | es to Your Statement of | Financial Affairs for Individ | uals Filing for Bankruptcy (Official Form 107)? |
| | ✓ No | | | |
| | Yes | | | |
| ı | Did you pay or agree to pay so | omeone who is not an at | torney to help you fill out b | ankruptcy forms? |
| | ✓ No | | | |
| İ | Yes. Name of person | | | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT

| | | Northern Distric | t of Illinois | |
|-------|---|-------------------------------------|---|------------------------------|
| In re | Mark Coleman | | Case No. | |
| | Debtor | | | (If known) |
| | | | Chapter | Chapter 13 |
| | DISCLOSURE OF | COMPENSATIO | N OF ATTORNEY F | OR DEBTOR |
| С | Pursuant to 11 U.S.C. § 329(a) and from pensation paid to me within one endered or to be rendered on behalf | year before the filing of the p | etition in bankruptcy, or agreed to | be paid to me, for services |
| F | For legal services, I have agreed to a | ccept | | \$4,000.00 |
| F | Prior to the filing of this statement I | nave received | | \$350.00 |
| Е | Balance Due | | | \$3,650.00 |
| 2. T | The source of the compensation paid | d to me was: | | |
| | ✓ Debtor | Other (specify) | | |
| 3. T | The source of the compensation paid | d to me is: | | |
| | Debtor | Other (specify) | | |
| 4. | I have not agreed to share the ab members and associates of my I | ove-disclosed compensation aw firm. | with any other person unless the | y are |
| [| | v firm. A copy of the agreeme | h a other person or persons who a nt, together with a list of the name | |
| 5. Ir | n return for the above-disclosed fee a. Analysis of the debtor's finar bankruptcy; | _ | service for all aspects of the bank advice to the debtor in determining | • • |
| | b. Preparation and filing of any | petition, schedules, statemen | ts of affairs and plan which may b | pe required; |
| | c. Representation of the debtor | at the meeting of creditors ar | nd confirmation hearing, and any a | adjourned hearings thereof; |
| | d. Representation of the debtor | in adversary proceedings and | d other contested bankruptcy matt | ters; |
| 6. E | By agreement with the debtor(s), the | above-disclosed fee does no | t include the following services: | |
| | | | | |
| | | CERTIFICA | ATION | |
| | ertify that the foregoing is a compler(s) in this bankruptcy proceedings. | te statement of any agreemen | t or arrangement for payment to m | ne for representation of the |
| | 9/21/2017 | | /s/ Mary E.R. Walters | |
| | Date | | Signature of Attorney | |
| | | | Semrad Law Firm | |
| | | | Name of law firm | |

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT

| | de la companya de la | Northern Distric | ct of Illinois | |
|-----------------|--|--|--|--|
| n re | Mark Coleman | | Case No. | |
| <u> </u> | Debtor | · · · | | (If known) |
| | | | Chapter | Chapter 13 |
| D | ISCLOSURE OF C | OMPENSATIO | N OF ATTORNEY F | OR DEBTOR |
| AAMIDA | partion poid to ma within one w | ear hefore the filing of the I | fy that I am the attorney for the abo petition in bankruptcy, or agreed to ation of or in connection w ith the |) De partito me, for services |
| | gal services, I have agreed to acc | | | \$4,000.00 |
| _ | o the filing of this statement I ha | | | \$350.00 |
| Baland | _ | | | \$3,650.00 |
| | ource of the compensation paid t | to me was: | | |
| 2. 1110 00 | Debtor | Other (specify) | | |
| 0. The se | ource of the compensation paid | to maje: | | |
| 3. The sc | Debtor | Other (specify) | r Francisco | |
| | | | | |
| 4. 🔽 I I | have not agreed to share the abo nembers and associates of my la | ove-disclosed compensation w firm. | n with any other person unless the | ey are |
| | have agreed to share the above- nembers or associates of my law ne people sharing in the compen | firm. A copy of the agreem | ith a other person or persons who ent, together with a list of the nam | are not es of |
| 5. In retu a | urn for the above-disclosed fee, a. Analysis of the debtor's finand bankruptcy; | I have agreed to render legation and rendering | al service for all aspects of the ban g advice to the debtor in determinir | kruptcy case, including: ng whether to file a petition in |
| . b | o. Preparation and filing of any p | etition, schedules, stateme | ents of affairs and plan which may | be required; |
| | | | and confirmation hearing, and any | |
| | | | nd other contested bankruptcy ma | |
| | | | not include the following services: | |
| | | | | |
| | | • | | |
| | | CERTIFIC | CATION | |
| l certify | y that the foregoing is a complet | | ent or arrangement for payment to | me for representation of the |
| debtor(s) in | n this bankruptcy proceedings. | | | |
| | 9/21/2017 | | /s/ Mary E.R. Walters Signature of Attorney | |
| | Date | | Olg Haland O. Filler | |
| | 4 | gradient de la company de la c | Semrad Law Firm | |
| | | | Name of law firm | |

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

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- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

 Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

| 1. Any attorney retained to represent a debt arising in the case unless otherwise ordered | or in a Chapter 13 case is responsible for representing the debtor on all matters by the court. For all of the services outlined above, the attorney will be paid a flat |
|---|---|
| fee of \$4,000.00 | |
| 2. In addition, the debtor will pay the filing | fee in the case and other expenses of \$371.76 |

3. Before signing this agreement, the attorney has received \$350.00 toward the flat fee, leaving a balance due of \$3,650.00; and \$61.76 for expenses, leaving a balance due of \$4,021.76

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

9/21/2017

Do not sign if the fee amounts at top of this page are blank.

Signed:

/s/ Mark Coleman

Debtor(s)

/s/ Mary E.R. Walters

Attorney for Debtor(s)

Local Bankruptcy Form 23c

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | \$245 | filing fee |
|---|-------|--------------------|
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---|---------|--------------------|
| + | \$550 | administrative fee |
| | \$1,717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | | filing fee administrative fee |
|---|-------|----------------------------------|
| + | · · | |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to:
http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit
20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Coleman, Mark | Case No. | Case No. | | |
|-----------------|---------------|--|--------------------------------------|--|--|
| | Debtor(s) | Oase No. | | | |
| | | Chapter. | Chapter13 | | |
| | VERIF | ICATION OF CREDITOR MAT | TRIX | | |
| Ti knowledge | | rify that the attached list of creditors is tr | rue and correct to the best of their | | |
| Date: | 9/21/2017 | /s/ Coleman, Ma Coleman, Mark Signature of Dek | | | |

ALLY FINANCIAL PO Box 130424 Saint Paul, MN, 55113

AFNI, INC. PO Box 3517 Bloomington, IL, 61702

SYNCB/JCP PO BOX 965007 Orlando, FL, 32896

SYNCB/WALMART Po Box 530927 Atlanta, GA, 30353

Brittany Springs Apartment 2504 Bordeaux Ln Naperville, IL, 60540

Krause, Miriam 313 Emerald Ct. Bolingbrook, IL, 60440

First Rate Financial 180 S Bolingbrook Dr Bolingbrook, IL, 60440

Americash - Bankruptcy 880 Lee Street Suite 302 Des Plaines, IL, 60016

Archer Field Funding 3601 PGA Boulevard Palm Beach Gardens, FL, 33410

Bolingbrook Health Care Associates 181 Fernwood Dr, Bolingbrook Bolingbrook, IL, 60440

IDOR-Bankruptcy Section PO Box 64338 Chicago, IL, 60664 Case 17-28304 Doc 1 Filed 09/21/17 Entered 09/21/17 15:51:48 Desc Main Document Page 61 of 66

| Debtor 1 Mark First Name | | Coleman | Case number (if kno | |
|---|--|---|---|---|
| | Middle Name uestions for Reporting Purpose | Last Name | | |
| ^{16.} What kind of debts do you have? | 16a. Are your debts primarily "incurred by an individua No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily | y consumer debts al primarily for a pe y business debts? investment or thro | Business debts are de | bts that you incurred to obtain ne business or investment. |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | ☐ No. | r 7. Do vou estimate | | operty is excluded and administrative ed creditors? |
| ^{18.} How many creditors do you estimate that you owe? | ☑ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999 | 1,000-5 5,001-1 10,001- | 0,000 | 25,001-50,000 50,001-100,000 More than 100,000 |
| 19. How much do you estimate your assets to be worth? | ✓ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million | \$10,000 \$50,000 | 001-\$10 million ,001-\$50 million ,001-\$100 million 0,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| 20. How much do you estimate your liabilities to be? Part 7: Sign Below | ✓ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million | \$1,000,0 \$10,000 \$50,000 | 001-\$10 million ,001-\$50 million ,001-\$100 million 0,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| For you | If I have chosen to file under Cha of title 11, United States Code. I under Chapter 7. If no attorney represents me and out this document, I have obtain I request relief in accordance with I understand making a false state | apter 7, I am aware understand the re I I did not pay or ac ed and read the no h the chapter of tit ement, concealing use can result in fin | that I may proceed, if elief available under each gree to pay someone whatice required by 11 U.S. le 11, United States Coproperty, or obtaining ues up to \$250,000, or i | ode, specified in this petition. money or property by fraud in imprisonment for up to 20 years, or |
| | MM / DD / | YYYY | Executed on | MM / DD / YYYY |

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| | _ | 50 | ournerit i age | 02 01 00 | |
|---|---|--|--|--|---|
| Fill in this infor | mation to identify your o | Case: | | | |
| Debtor 1 | Mark | | Coleman | | |
| Debtor 2 | First Name | Middle Name | Last Name | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | N.C. |
| United States B | ankruptcy Court for the: | Northern | District of Illinois | . | |
| Case number (If known) | | | (State) | _ | |
| Official I | Form 106De | ec | | | Check if this is an amended filling |
| Declarati | on About an | Individual Deb | tor's Schedule | s | |
| | | | onsible for supplying corre | | 12/15 |
| You must file the money or prope J.S.C. §§ 152, 1 | is form whenever you t rty by fraud in connect 341, 1519, and 3571. | île bankruptcy schedules ion with a bankruptcy ca | or amended schedules. Ne se can result in fines up to | flaking a false statement, con o \$250,000, or imprisonment (| cealing property, or obtaining for up to 20 years, or both. 18 |
| Part 1: Sign | Below | | | | |
| Did you pa | y or agree to pay some | one who is NOT an attorn | ney to help you fill out bar | ıkruptcy forms? | |
| Yes, N | ame of person | | Attach Bankruptcy Signature (Official I | Petition Preparer's Notice, Declar Form 119). | ration, and |
| | enter I | the contract | | | |
| | Her. | | | | |
| Under pena that they a | ilty of perjury, I declare re true and correct/ | that I have read the sun | nmary and schedules filed | with this declaration and | · |

Signature of Debtor 2

MM/DD/YYYY

Date

that they are true and correct/

X /s/ Mark Coleman Signature of Debtor 1

Date 9/21/2017

MM/DD/YYYY

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| Debt | | Mark First Name | NP III A | Coleman | Case number (ff known) |
|----------|---------------|---|---|--|---|
| | |) 119[(46)110 | Middle Name | Last Name | |
| 28. | WitI cred | nin 2 years before ditors, or other pa | you filed for bankruptcy, did $_{ m 2}$ irties. | you give a financial statem | ent to anyone about your business? Include all financial institutions, |
| | ☑ | No | | | |
| | | Yes. Fill in the det | tails below. | | |
| Í | | | | Date issued | |
| | | Name | | MM/DD/YYYY | - |
| | | Number Street | | | |
| | | Mannet Stiest | | | |
| | | City | State Zip Code | . | |
| | | la:a.: | and and a | | |
| Part : | 12: | Sign Below | | _ | |
| tro a | ue ar bank | kruptcy case can i | result in fines up to \$250,000, Mark Coleman | atement, concealing prope or imprisonment for up to | nents, and I declare under penalty of perjury that the answers are orty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | | Signatu | ire of Debtor 1 | | Signature of Debtor 2 |
| | | Date 9 | /21/2017 | | Date |
| Di | d yo | u attach addition: | al names to Your Statement of | E Min | |
| _ | | | in hades to Loni Grafement Of | Financial Attairs for Individ | duals Filing for Bankruptcy (Official Form 107)? |
| | No Ye | | | $\frac{\partial \mathcal{L}(x,y)}{\partial x} = \frac{\partial \mathcal{L}(x,y)}{\partial x} \frac{\partial \mathcal{L}(x,y)}{\partial y} = 0$ | $\mathcal{L}(\theta_{i}, \mathbf{p}_{i}) = \mathcal{L}(\theta_{i}, \mathbf{p}_{i}) + \mathcal{L}(\theta_{i}, \mathbf{p}_{i}) + \mathcal{L}(\theta_{i}, \mathbf{p}_{i}) + \mathcal{L}(\theta_{i}, \mathbf{p}_{i})$ |
| Dic | d yo | u pay or agree to: | pay someone who is not an at | torney to help you fill out t | |
| [Z | No | | | torney to neip you ist out to | BINKTUPTCY forms? |
| | | s. Name of person | | | |
| | 1 | or Harry or polson | rahum gay raganaan inda san gay ga adda kan wa may agaan dada kan aay ay ay ahadaan sa waxay ay ay ahada kan sa | | Attach the Bankruptcy Patition Preparer's Notice, Declaration, and Signature (Official Form 119). |

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Coleman, Mark | | |
|----------------|--|---|----------|
| | Debtor(s) | Case No | |
| | | Chapter. Chapter13 | |
| • | VERIFICA | TION OF CREDITOR MATRIX | |
| T knowledge | he above named Debtors hereby verify the | at the attached list of creditors is true and correct to the best | of their |
| Date: | 9/21/2017 | /s/ Coleman, Mark · Coleman, Mark · Signature of Debtor | |

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| De | bto | r 1 Mark First Name | | Coleman | Case number (if known) | |
|--|---------|--|--|---|--|--|
| ······································ | ******* | Medicon (1990) 100 1 | Middle Name | Last Name | | |
| 16 | š. | Calculate the median | family income that applies to y | ou. Follow these steps | en e | 0 1 to San 1 1 ferrir 9 5 60 50 60 60 feet warmay 1 7 5 6 60 50 60 60 60 60 60 60 60 60 60 60 60 60 60 |
| | | 16a. Fill in the state in t | | Ilfinois | | |
| | | | of people in your household. | 2 | | |
| | | 16c. Fill in the median throusehold | family income for your state and si | | | \$66,487.00 |
| | | | cified in the separate instructions for | To find or this form. This list m | a list of applicable median income amounts, go online ay also be available at the bankruptcy clerk's office. | • |
| 17 | • | How do the lines com | pare? | 7 410 101117 1113 131 111 | ay also be available at the bankruptcy clerk's office. | |
| NA THE WARRENCE AND THE PARTY OF THE PARTY O | | 17a. Line 15b is le under 11 U.S | ss than or equal to line 16c. On th . <i>C. § 1325(b)(3).</i> Go to Part 3. D | e top of page 1 of this NOT fill out <i>Calculatio</i> | form, check box 1, <i>Disposable income is not determined</i> on of Disposable Income (Official Form 122C-2). | |
| | | 0.0.0. y 102. | ore than line 16c. On the top of p 5(b)(3). Go to Part 3 and fill out our current monthly income from li | Calculation of Dienoe | ck box 2, <i>Disposable income is determined under 11</i> able Income (Official Form 122C-2). On line 39 of that | |
| | t 3 | Calculate Your (| Commitment Period Under | 11 U.S.C. §1325(b) | 0(4) | |
| 18 | | | ge monthly income from line 11 | | | \$5,563.17 |
| 19 | | The second second | 101 1 1 0:0:0: 8 1050(D)(4) allOMS | married, your spouse is you to deduct part of v | s not filing with you, and you contend that calculating the | 44,400.11 |
| | | 19a. If the marital adjus | tment does not apply, fill in 0 on li | ne 19a. | www.cocococococococococococococococococo | -\$0.00 |
| | - | 19b. Subtract line 19a | from line 18. | | A CONTRACTOR OF THE CONTRACTOR | \$5,563.17 |
| 20. | . (| Calculate your current | t monthly income for the year. F | ollow these steps: | | \$5,363.17 |
| | | On Convillation | | • | | \$5,563.17 |
| | | Multiply by 12 (the | number of months in a year). | er de la | en de la company | x 12 |
| | | | surrent monthly income for the year | | | \$66,758.04 |
| | 2 | Oc. Copy the median fa | amily income for your state and siz | e of household from li | пе 16с. | \$66,487.00 |
| 21. | ŀ | low do the lines comp | pare? | | | |
| | | Line 20b is less that commitment period | n line 20c. Unless otherwise ordere is 3 years. Go to Part 4. | ed by the court, on the | top of page 1 of this form, check box 3, The | 44 |
| | E | Line 20b is more that 4, The commitment | an or equal to line 20c. Unless oth period is 5 years. Go to Part 4. | erwise ordered by the o | court, on the top of page 1 of this form, check box | TO 100 A TO |
| Pari | t 4: | Sign Below | | | | Account of the state of the sta |
| | | By signing here, I de | eclare under penalty of party that | the information on this | s statement and in any attachments is true and correct. | **** |
| | | | | are information on this | s statement and in any attachments is true and correct. | MANAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA |
| | | 🗶 /s/ Mark Cole | eman /// | - x | | Mendelparage |
| | | Signature of Del | otor 1 | | Signature of Debtor 2 | *************************************** |
| | | Date 9/21/201 | · | Ĺ | Pate | *************************************** |
| | | MM/DD/\ | YYY | | MM/DD/YYYY | топинали |
| | | If you checked 17a, If you checked 17b, above. | do NOT fill out or file Form 122C- fill out Form 122C-2 and file it wit | 2. h this form. On line 39 | of that form, copy your current monthly income from line | 14 |
| | | | and the second s | | | - |

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| Debtor 1 | | | Coleman | Case number (ff known) |
|--------------|--------------|-------------------------------|-----------|--|
| | First Name | Middle Name | Last Name | |
| Part 4: | Sign Below | | | · |
| x /s/ | Mark Coleman | fy your declare that the info | ×_ | ent and in any attachments is true and correct. Insture of Debtor 2 te MM/DD/YYYY |
| | | | | |